



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2005 APR -8 AM 9:29

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Black Rhino Tours

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Jeffrey Scott Gardner

51965 Avenida Herrera La Quinta, CA 92253

3. The general type of business transacted under the assumed business name is:

- | | |
|--|---|
| <input type="checkbox"/> Retail Trade | <input checked="" type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

Jeff Gardner

5924 N. Silver Pine Ct.

Coeur d' Alene, ID 83815

Submit Certificate of
Assumed Business
Name and **\$25.00** fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Jeff Gardner

51965 Avenida Herrera

La Quinta, CA 92253

Phone number (optional):

(760) 771-8397
(760) 219-1087 (cell)

Secretary of State use only

Signature:

(Handwritten signature)
(signature required)

Printed Name:

Jeffrey Scott Gardner

Capacity/Title:

Owner/Operator

(see instruction # 8 on back of form)

g:\corp\forms\abn forms\abn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
04/08/2005 05:00
CK: 132 CT: 158018 BH: 803555
1 @ 25.00 = 25.00 ASSUM NAME # 2

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