

334 2080

~~FILED EFFECT~~



CERTIFICATE OF
ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

business is: WR EXTREME SKITORING

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

Name

Tyler Peterson
Steve Mills

Complete Address

Box 78 Bellevue ID 83313
Box 247 Hailey ID 83333

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

- ☐ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☒ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate
- Submit
 Assum
 Name:

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

NR Extreme Ski Jolene
PO Box 78
Bellevue 1083313

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

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

Phone number (optional):

Phone Number (optional):
(208) 720-0329

Signature: _____

(signature required)

Printed Name:

Capacity/Title:

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
412 4225

01/12/2005 05:00

CK: 11235438406SLD CT: 172899 BH: 786982
1 @ 25.00 = 25.00 ASSUM NAME # 2

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