

## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

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

12 JAN 23 AM 10: 02

## Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the und business is:  Stone Creek Poor	
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name  Brooke Stone  ———————————————————————————————————	
3. The general type of business transacted un  Retail Trade Transportation  Wholesale Trade Construction  Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	and Public Utilities  Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:  Branke Stane 19489 Top Rd.  Circentea F, ID 83626	Name and \$25.00 fee to:  Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgmen copy is (# other than # 4 above):	Secretary of State use only
Signature: Dwo Ke Stone  Printed Name: Brooke Stone  Capacity/Title: Dwner   Breeder	The state of the s
Signature: Printed Name: Capacity/Title:	IDAHO SECRETARY OF STATE 01/24/2012 05:00 CK: 1609 CT: 158010 BH: 1307392

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CK: 1009 CT: 150010 BH: 1307392 1 0 25.00 = 25.00 ASSUM NAME # 2

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