



CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 SEP -9 PM 3:53

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 undersigned use(s) in the transaction of business is:

Fulton Funny Farm

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

<u>Name</u>	<u>Complete Address</u>
Stefanie D. Fulton	1895 E 1300 S Gooding IDAHO 83330
Morgan A. Fulton	1895 E 1300 S Gooding IDAHO 83330
Les W. Fulton	1895 E 1300 S Gooding IDAHO 83330

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

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

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

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

1895 E 1300 S Gooding IDAHO 83330

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

Signature: [Signature]

Printed Name: Stefanie D. Fulton

Capacity/Title: Owner

Signature: [Signature]

Printed Name: Morgan A. Fulton

Capacity/Title: Manager

Secretary of State use only

abr.pmd Rev. 07/2010

IDAHO SECRETARY OF STATE
09/09/2011 05:00
CK: 781834 CT: 172899 BH: 1289866
1 @ 25.00 = 25.00 ASSUM NAME # 2

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