



**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

JUN 29 1 38 PM '01

SECRETARY OF STATE
STATE OF CALIFORNIA

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:

Premier CARIBBEAN TRAVEL

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

Name
PENLOPE E SHELDON

Complete Address

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 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:

AS ABOVE

Submit Certificate of
Assumed Business
Name and \$20.00 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):

Phone number (optional):

Secretary of State use only

Signature: 

Printed Name: P. Shetz Dyal

Capacity:

(see instruction # 8 on back of form)

IDaho SECRETARY OF STATE
07/02/2001 09:00
CK: CASH CT: 140284 BH: 405000
1 E 20.00 = 20.00 ASSUM NAME # 2

P 46520