

Capacity/Title: OWNQ/

(see instruction # 8 on back of form)

## 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.

07 OCT 24 AM 8: 25

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the undersign business is:  Around Town  Around Town	gned use(s) in the transaction of
2. The true name(s) and business address(es) of the business under the assumed business name:  Name  Chris Sindair  Erin Sindair  M	Complete Address  Call, TD 83638
3. The general type of business transacted under the	he assumed business name is:
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Ecin Sinclair P.O. Pox 208 Mc(all, TD 83638)	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	
ignature: <u>Erin Sinclair</u>	Secretary of State use only

IDAHO SECRETARY OF STATE

10/24/2007 05:00

CK: 341 CT: 158018 BH: 1882621

1 8 25.88 = 25.88 ASSUM NAME # 2