



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.

FILED EFFECTIVE

2003 OCT 30 AM 8:47

SECRETARY OF STATE
STATE OF IDAHO

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

Across The Ice

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

Name	Complete Address
<u>Angi S. McBride</u>	<u>PO Box 224 Donnelly Id 83615</u>
<u>Leesa A. Large</u>	<u>1002 Rowland McCall Id 83638</u>

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:

Leesa Large
1002 Rowland
McCall Idaho 83638

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

angi mcbride
PO BOX 224
Donnelly Idaho 83615

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):

634-3370

Signature: angi mcbride
(signature required)

Printed Name: angi mcbride

Capacity/Title: partner

(see instruction # 8 on back of form)

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Revised 04/2003

Secretary of State use only

IDAHO SECRETARY OF STATE
10/30/2003 05:00
CK: 8351 CT: 173992 BH: 709175
1 @ 25.00 = 25.00 ASSUM NAME # 2

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