	CERTIFICATE OF ASSUI (Please type or print legibly. \$	See instructio	onscon réverse.)
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name			
1.	. The assumed business name which the undersigned use(s) in the transaction of business is:		
	Sun Valley Area Cen	tral 7	Reservations
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	Lauri L. Maher 134 Meanows Loop		
	(mailing apous) P.O. Box 903		
		Keter	hum 10 83340
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)		
		Fin	Ansportation and Public Utilities ance, Insurance, and Real Estate ning 208 725 0824 r (optional):
	Box 903	Sensitur	Submit Certificate of Assumed Business Name and \$20.00 fee to:
	Ketchum by 83340 Name and address for this acknowledgmen copy is (if other than # 4 above):	t	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
•		5/88	Secretary of State use only IDAHO SECRETARY OF STATE
- Signatui	re:	Revision 12/99	67/16/2666 69:66 CK: 1874 CT: 123169 BH: 332262
	Name: Lauri Maher	55	1 @ 28.08 = 28.80 ASSUM MANE # 2
Capacity: Ou med Incapacity			
	(see instruction # 8 on back of form)	g:koorpife	37266