

CERTIFICATE OF ASSUMED BUSINESS NAME

2014 JUL 25 AM 8: 1.9

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

Please type or print legibly. Instructions are included on back of application.

Printed Name:

Capacity/Title:

| DancZenSV | |
|--|--|
| The true name(s) and <u>business</u> addr business under the assumed busine | ress(es) of the entity or individual(s) doing ss name: |
| <u>Name</u> | Complete Address |
| Peggy Bates | 671 B First Ave. N., Ketchum, ID 83340 |
| Dale Bates | 671 B First Ave. N., Ketchum, ID 83340 |
| | |
| | lture Submit Cartificate of |
| Finance, Insurance, and Real | Assumed Business |
| The name and address to which future correspondence should be addressed Peggy Bates P.O.Box 8800 | Secretary or State |
| Ketchum, ID 83340 | 200 334-2301 |
| Name and address for this acknowle copy is (if other than # 4 above): | dgment |
| | |
| | Secretary of State use only |
| inature: | IDAHO SECRETARY OF STA |
| gnature: Peggy Bates | |

1) 172781