

Capacity/Title:

(see instruction # 8 on back of form)

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	F
The assumed business name which the undersign business is:	ed use(s) in the transaction of
PLAYS WITH	<i>GUNS</i>
The true name(s) and business address(es) of the business under the assumed business name:	entity or individual(s) doing
Name	Complete Address
MARK L. GUNNING 5/1	HIAWATHA ST. POCATEL
JANELISE GUNNING (WIFE)	70AHO 80204
3. The general type of business transacted under the	
Retail Trade Transportation and P Wholesale Trade Construction	ublic Utilities
☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
	Basement West
MARK L. GUNLING	PO Box 83720 Boise ID 83720-0080
PARTELIA TRAIL GODAL	208 334-2301
YOCATELLO, LDAHS 84264	
5. Name and address for this acknowledgment	Phone number (optional):
COPY IS (if other than # 4 above):	(H) 208-202-4180
SAME (W) 204-257-/680
	Secretary of State use only
nature: MANN (CUNNING 1990)	D 8003
nature: / (signature required) nted Name: MARK C. GUNNING Property of the pro	IDAHO SECRETARY OF STATE

C. GUNNING OND NAME OF THE SERVICE O

IDAHO SECRETARY OF STATE

9/15/2004 05:00

CK: 5353 CT: 156010 RH: 766111

1 0 25.00 = 25.00 ASSUM NAME # 2