

## CERTIFICATE OF ASSUMED BUSINESS NAME

09 AUG 10 AM 8: 32

**FILED EFFECTIVE** 

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

Travis W Holycross

Owner

(see instruction # 8 on back of form)

Printed Name:

Capacity/Title:

N	lational Exams
The true name(s) and business address business under the assumed business	name:
Name	Complete Address
TheLake, Inc.	209 Shadypines, Priest Lake, ID 83856
<u>(C153338)</u>	
The general type of business transacte	ed under the assumed business name is:
Retail Trade Transport Wholesale Trade Construc	tation and Public Utilities
Services Agricultu Manufacturing Mining Finance, Insurance, and Real Es	Assumed Business
The name and address to which future correspondence should be addressed:	450 N 4th Street PO Box 83720
National Exams	Boise ID 83720-0080
209 Shadypines	(208) 334-2301
Priest Lake, ID 83856	
<ol> <li>Name and address for this acknowled copy is (if other than # 4 above);</li> </ol>	<b>Igment</b>
	<del></del> <del></del>

IDAHO SECRETARY OF STATE

08/10/2009 05:00

CX: 2660 CT: 217543 NN: 1182266