



CERTIFICATE OF ASSUMED BUSINESS NAME **FILED EFFECTIVE**

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

05 FEB - 04 PM 1:18

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

ROBERT'S HIDE OUT ~~RESTAURANT~~ SALOON

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

<u>Name</u>	<u>Complete Address</u>
<u>RBS ENTERPRISES INC</u>	<u>400 N KINGS RD</u>
<u>C145378</u>	<u>SUITE #34</u>
	<u>NAMPA, ID 83687</u>

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" 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:

Robert + BARBARA STROUD
400 N KINGS RD
SUITE #34
NAMPA, ID 83687

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

Signature: _____

(signature required)

Printed Name: Robert Stroud JR

Capacity/Title: VICE PRESIDENT

(see instruction # 8 on back of form)

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): _____

Secretary of State use only

g:\corp\forms\slain form\slain.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
02/04/2005 05:00
CK: 1898 CT: 158010 BH: 791235
1 @ 25.00 = 25.00 ASSUM NAME # 2

D84166