

FILED EFFECTIVE



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.

2006 MAY 18 AM 8:57

SECRETARY OF STATE
STATE OF IDAHO

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

High Desert Concession

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

Name

Complete Address

Tammy Greufe

214 Glacier Dr Jerome IDA, 83338

Ted Greufe

214 Glacier Dr Jerome IDA, 83338

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:

Tammy Greufe

214 Glacier Dr

Jerome IDA 83338

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

D.L. Evans Bank

980 S. Lincoln

Jerome, ID 83338

Signature: Tammy Greufe
(signature required)

Printed Name: TAMMY GREUFE

Capacity/Title: Owner

(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):

208-334-3474

Secretary of State use only

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IDAHO SECRETARY OF STATE
05/18/2006 05:00
CK: 6679 CT: 150010 BH: 955335
1 @ 25.00 = 25.00 ASSUM NAME # 2