



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.

FILED EFFECTIVE

MAR 15 AM 10:40

SECRETARY OF STATE
STATE OF IDAHO

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

Hurricane Divers

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

Name

Michael Jones

Robert Kraak

Complete Address

PO Box 8538, Boise, ID 83707

Apt. Postal 196, Huatulco, Oaxaca, Mexico 70989

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:

Michael Jones

Hurricane Divers

1003 N. 16th Street, Boise, ID 83702

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

same

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) 345-1103

Secretary of State use only

Signature: _____

(signature required)

Printed Name: _____

Michael G Jones

Capacity/Title: _____

Manager

(see instruction # 8 on back of form)

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Revised 04/2003

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IDAHO SECRETARY OF STATE
03/16/2004 05:00
CK: 1559 CT: 150010 BH: 733377
1 @ 25.00 = 25.00 ASSUM NAME # 2