

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.

01 OCT -2 AM 8:45

SECRETARY OF STATE
STATE OF IDAHO

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

Sportsman's Rental

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
<u>Shane O'Harra</u>	<u>10090 W. Martingale Drive</u> <u>Boise, ID 83709</u>
<u>Blake Johnson</u>	<u>1209 Cottail, Nampa, ID 83686</u>

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

- | | |
|--|--|
| <input checked="" 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:

Shane O'Harra
10090 W. Martingale Dr.
Boise, ID 83709

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Phone number (optional):

Signature: Shane O'Harra

Printed Name: Shane O'Harra

Capacity: Partner

(see instruction # 8 on back of form)

Secretary of State use only

g:\corpforms\abn_forms\abn.pfs
Revised 01/2001

IDAHO SECRETARY OF STATE
10/02/2001 05:00
CK: 2727 CT: 125736 BH: 422166
1 @ 20.00 = 20.00 ASSUM NAME # 2

D 48772