CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO		
То	the SECRETARY OF STATE, STATE OF I Pursuant to Section 53-504, Idaho Cod gives notice of adoption of an Assumed	de, the undersigned RELAD TO SALE TO SEE
1.	The assumed business name which the unbusiness is: Pack River General Store	indersigned use(s) in the transaction of
2.	The true name(s) and business address(es business under the assumed business name	· · · · · · · · · · · · · · · · · · ·
3.	The general type of business transacted un (mark only those that apply) Retail Trade	ng Transportation and Public Utilities Finance, Insurance, and Real Estate
4.	The name and address to which future correspondence should be addressed:	
	Martin & Arlene Jacobson 1587 Rapid Lightning Rd.	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgment copy is (if other than # 4 above): same	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Signatu	ure: Mart & probin - Quant Jacob	Secretary of State use only IDANO SECRETARY OF STATE 09/20/2000 09:08 CK: 9483 CT: 79651 NH: 349581
1 8 20.00 = 20.00 ASSUM NAME # 2		
Capacity: Owners Jucobscv (see instruction #8 on back of form)		
•	(see instruction # 8 on back of form)	