

CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

FILED

99 JUL 17 10:00 AM
STATE OF IDAHO

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

Teton Villa Apartments

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

Name

Address

DARREN E. JOSEPHSON

P.O. Box 1445 Idaho Falls
Ida. 83403

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

Apartment Rentals

See categories on the reverse

4. The name and address to which correspondence should be addressed:

Teton Villa Apts. % Darren Josephson

P.O. Box 1445 Idaho Falls Ida. 83403-1445

Signed

Darren E. Josephson

By

DARREN E. JOSEPHSON

Capacity

OWNER

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

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

IDAHO SECRETARY OF STATE use only

06/17/1999 09:00
CK: 451 CT: 116945 IN: 226629

1 @ 20.00 = 20.00 ASSUM NAME # 2

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Revision 10/98

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