

Printed Name:

Capacity/Title:

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2005 APR -1 AM 9: 14

FILED EFFECTIVE

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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SPORTS MAN MO	toR S
2. The true name(s) and business address(es) of the business under the assumed business name:  Name  MARTY Jam Sow  Am' Jam: Sow	the entity or individual(s) doing  Complete Address  3850 SW. 444 AVE  Newply mouth IO 8365
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining	
Finance, Insurance, and Real Estate  The name and address to which future correspondence should be addressed:  2424 Calchell Blud  Nampa IN 83651	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):  3850 SW Y=4  Newply Mode ID: 83655	Phone number (optional): 208-461-8512
Newply Moth ID. 83655	Secretary of State use only

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IDAHO SECRETARY OF STATE

04/01/2005 05:00

CK: 314 CT: 158818 BH: 882199
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