

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILE



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

STATE OF IDAHO

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

THE GOLF MERCHANT

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

NameComplete Address

William H. Henningsen 302 W. 4th #62
Post Falls ID 83854

3. The general type of business transacted under the assumed business name is:
 (mark only those that apply)

<input checked="" type="checkbox"/> Retail Trade	<input checked="" type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): _____

William H. Henningsen
302 West 4th #62
Post Falls ID 83854

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

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

Secretary of State use only
 IDAHO SECRETARY OF STATE

03/11/1998 09:00
 CR: 1125 CT: 95538 DR: 89761

1 0 20.00 = 20.00 ASSUM NAME

Signature: William H. Henningsen

Printed Name: William H. HENNINGSEN

Capacity: President

(see instruction # 8 on back of form)

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