## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) Pursuant to Section 53-504, Idaho Code, the understoned 14 All 9:46 To the SECRETARY OF STATE, STATE OF IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is: THE RIVER PLACE 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 Complete.Address G. KENT SEVERE 519 OVERLAND AVE., BURLEY, IDA. 83318 JUDY SEVERE SAME 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): correspondence should be addressed: SAME AS ABOVE Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West CODY IS (if other than # 4 above): PO Box 83720 SAME AS ABOVE Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE **01/14/2002 05:00** CK: 979000 CT: 155715 BH: 439915 Printed Name: G. KENT SEVERE Capacity:\_\_ 1 0 20.00 = 20.00 ASSUM NAME # 2 OWNER

(see instruction # 8 on back of form)

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