D47803

## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

the SECRETARY OF STATE, STATE OF 10	· · · · · · · · · · · · · · · · · · ·
Pursuant to Section 53-504, Idaho Code,	the undersigned
gives notice of adoption of an Assumed B	lusiness Name.
9,700 (101,000 0)	1 1/4

To the SECRETARY OF STATE, STATE  Pursuant to Section 53-504, Idahe  gives notice of adoption of an Ass	o Code, the undersigned <u>same</u> sumed Business Name.
The assumed business name which the und	lersigned use(s) in the transaction of
business is:	<b>,</b>
	THE BEARS DEN
The true name(s) and business address(es) business under the assumed business name	of the entity or individual(s) doing e is/are:
NAOMI BROWN 2	Complete Address 572 Poleline E. Twin Falls, ID
	s e
	24 STA
	<u>&gt;(</u>
3. The general type of business transacted un	nder the assumed business name is:
Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	<ul><li>Finance, Insurance, and Real Estate</li><li>Mining</li></ul>
correspondence should be addressed:	hone number (optional) ( <u>208) 734-2438</u>
NAOMI BROWN	Submit Certificate of
<del></del>	Assumed Business
25/2 POLELINE RDE.	Name and <b>\$20.00</b> fee to:
Two FA115 TD, 83301	Secretary of State
TWIN TALIS, ID, 83301	Secretary of State 700 West Jefferson
5. Name and address for this acknowledgmen	
CODY IS (if other than # 4 above).	PO Box 83720
COPY TO WOULD WITH A PERSON	Boise ID 83720-0080
	208 334-2301
	Secretary of State use only
	-
	22
The same	Revision 12/99
gnature: Thome Theur	\"
- /4/ 1 . 1	IDAHO SECRETARY OF STATE
rinted Name: MAONI DROWN	CK: 1443 CT: 150288 BH: 414581
anacity: Anacity / MWher	1 0 20.00 = 20.00 ASSUM NAME # 8

nwher

Capacity: Mange

(see instruction # 8 on back of form)