

Capacity/Title:

Owner

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

F" FO EFFECTIVE

A Maria

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

Straight Shooter Enterprises  The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:	
Clark E. Callear	PO Box 843, Orofino, ID 83544
LeeAnn Callear	PO Box 843, Orofino, ID 83544
Lacey Callear	PO Box 843, Orofino, ID 83544
The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West
Straight Shooter Enterprises	PO Box 83720
PO Box 843	Boise ID 83720-0080
Orofino, ID 83544	208 334-2301
Name and address for this acknowledgme	ent Phone number (optional):
CODY IS (if other than # 4 above).	208-476-3186

IDAHO SECRETARY OF STATE

96/13/2995 95:00

CK: 2536 CT: 158010 BH: 815558
1 9 25.00 = 25.00 ASSUM NAME # 2

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