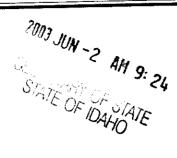


(see Instruction #8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly. e instructions on reverse before filina.



NOTE: See instructions of feverso policy immg.	_
The assumed business name which the undersigned business is: Nuckleherry Creek Queen and the control of t	` ^
2. The true name(s) and business address(es) of the enduriness under the assumed business name: Name Cincy Murray 3010	Complete Address
3. The general type of business transacted under the a Retail Trade Transportation and Pub Wholesale Trade Construction	
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720
P.O. JBOX 495 J athol In 83801	Boise ID 83720-0080 208 334-2301 Phone number (optional):
Name and address for this acknowledgment copy is (if other than # 4 above).	(208) 683·3580
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE 96/92/2093 95 = 96 CK: 2922 CT: 158918 BH: 6836

IDAHO SECRETARY OF STATE @6/@2/2003 @5 = @6 CK: 2922 CT: 158010 BH: 683687 1 @ 25.88 = 25.88 ASSUM NAME # 2

D 65938