

FILED EFFECTIVE

227



CERTIFICATE OF ASSUMED BUSINESS NAME

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

09 APR 20 AM 9:46

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See Instructions on reverse before filing.

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

Honeymoon Fund Online

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

Name	Complete Address
<u>The Vacation Fund LLC</u>	<u>301 W. Croy Hailey Id 83333</u>
<u>(W81409)</u>	<u>Box 1419 Hailey Id 83333</u>

3. The general type of business transacted under the assumed business name is:

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

4. The name and address to which future
correspondence should be addressed:

Larraine Kuntz
Box 1419
Hailey Id 83333

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

/

Signature: Larraine Kuntz
(signature required)

Printed Name: Larraine Kuntz

Capacity/Title: Owner

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

Secretary of State use only

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IDAHO SECRETARY OF STATE
04/20/2009 05:00
CK: 226631 CT: 172099 BH: 1166760
1 @ 25.00 = 25.00 ASSUM NAME # 4

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