

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

2007 FEB 15 PH 12: 08
SECRETARY OF STATE
STATE OF IDALIO

The assumed business name which the u business is: Downtown Shuffle	ndersigned use(s) in the transaction of
2. The true name(s) and business address(e business under the assumed business name Name Chris GripKey	es) of the entity or individual(s) doing ame: Complete Address PO Box 2656 Ketchum, ID 83340
3. The general type of business transacted Retail Trade Transportat	under the assumed business name is:
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	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 Boise ID 83720-0080
Po Box 2656 Ketchum, ID 83340 5. Name and address for this acknowled copy is (if other than #4 above):	gment Phone number (optional):
Same as above	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE 100
Capacity/Title: Owner (see Instruction # 8 on back of form)	— D 108333