

CERTIFICATE OF ASSUMED BUSINESS NAME

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

14 13/122 AH 10: 23

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

| 1. The assumed business name which the und business is: Att Bonneys Paint # U | ersigned use(s) in the | transaction of |
|---|--|--|
| 2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Name Toney Broker 3. The general type of business transacted under the second se | Complete A 2370 you k 2805 Wast M | Address SONS BONGE 83704 Africa Edular 83708 |
| | Submit Ce Assumed Name and Secretary 700 West Basement PO Box 83 | ertificate of Business \$25.00 fee to: of State Jefferson West 3720 |
| Name and address for this acknowledgmen copy is (if other than # 4 above); | Phone num 3 <u>フワー</u> 8 | nber (optional): |
| | Secre | tary of State use only |
| Signature: Signature (signature required) Printed Name: Songer | | 1DAHO SECRETARY OF STATE /22/2004 05:00 CASH CT: 158010 BH: 723073 |
| Capacity/Title: Own DV2 | oglodoco, is | 5.06 = 25.00 ASSUM NAME # 2 |
| (see instruction # 8 on back of form) | | |