CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See Instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO

	(Please type or print legibly.)		
30	To the SECRETARY OF STATE, STATE Pursuant to Section 53-504, Ida	hc	Code, the	undersigned 19 3 21 PM 'N
	gives notice of adoption of an A			· ** TK
1.	The assumed business name which the ur business is:	nde	ersigned use	e(s) in the transaction of
	Discount Magic			·
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:			
	Dale Harven	6	Con 04 W. 0	nplete Address
	Beverly Harvey		71	#530
	Fast Web Pages Inc		- 10	
3.	The general type of business transacted up (mark only those that apply)	nd	ler the assu	med business name is:
,	Retail Trade	_	 1	nsportation and Public Utilities ance, Insurance, and Real Estate ing
4.	The name and address to which future correspondence should be addressed:	⊃h	one number	(optional): 308-465-6381
	Dale Harven			0.1
	· · · · · · · · · · · · · · · · · · ·			Submit Certificate of Assumed Business
	1604 W. Dechard			Name and \$20.00 fee to:
	Namba 1D 83 C21			Secretary of State
5.	Name and address for this acknowledgme	nt		700 West Jefferson Basement West
٠.	CODY is (if other than #4 above):			PO Box 83720
				Boise ID 83720-0080
				208 334-2301
				Secretary of State use only
			Revision 12/89	
-		1	(84/a)	
natu	ire: Dal Warren			

Signature: Dal Warren

Printed Name: Dale Warren

Capacity:

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE
11/19/2001 05:00
CK: CASH CT: 153755 BH: 430456
1 @ 20.00 = 20.00 ASSUM NAME # 2

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