

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

FILED EFFECTIVE

2004 JAN 20 AM 10: 15

submits for filing a certificate of Assumed Business Name.

Please type or print legibly. NOTE: See instructions on reverse before filing.

CARLE OF IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of

business under the assumed business name: Name Michael Duane Econock Donna Pay Funniuk	Complete Address 888 Rim View W Tuing
The general type of business transacted under the Retail Trade Transportation and F	
 Wholesale Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Custom Markite a Tite 888 R.m Uicu W Twin Falls Fol 83361	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208 736-7744

Printed Name: Donna Eubniak

(see instruction #8 on back of form)

Capacity/Title: Dune r/Partner

IDAHO SECRETARY OF STATE
91/21/2094 95:00
CK: 1194 CT: 158010 BH: 722680
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