

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.

1- 00T 22 AM 11:42

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

(see instruction # 8 on back of form)

SECRET EN OF STATE STATE OF IDAHO

D81236

1. The assumed business name which the und business is:	dersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name	Complete Address 5454 Grover St Apt #X
The general type of business transacted un	der the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Robert Care	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West
30:00 Id 83705	PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above); 	nt Phone number (optional):
	Secretary of State use only
Signature: (signature required)	UNAND CEPRETARY OF STATE
Printed Name: Robert Carr	IDAHO SECRETARY OF STATE 10/22/2004 05:00 CK: CASH CT: 158818 BH: 772641 1 8 25.88 = 25.88 ASSUM NAME # 2
Capacity/Title:	1 0 25.00 = 25.00 ASSUM MANE # 2