## FILED/EFFECTIVE CERTIFICATE OF ASSUMED BUSINESS NAM (Please type or print legibly. See instructions on reverse.) $\mathcal{O}_{\mathcal{S}}$ To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Connection ake the 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address Michaldo St 1F17 laerson 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Minina 4. The name and address to which future Phone number (optional): correspondence should be addressed: 1368 Windson Dr. 1F 1D 83406 Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above): PO Box 83720 Boise ID 83720-0080 208 334-2301

Secretary of State use only
IDANO SECRETARY OF STATE 07/22/2002 05:00 CT: 158010 BH: 478301

Signature: (NA) Printed Name: (Jenra

Capacity: