27	
CERTIFICATE OF	R.
ASSUMED BUSINESS NAN Pursuant to Section 53-504, Idaho Code, the undersi submits for filing a certificate of Assumed Business N	gned EFFE
Please type or print legibly. NOTE: See instructions on reverse before filing	01 057 22 Fil 2:22
1. The assumed business name which the undersigned business is:	
2. The true name(s) and <u>business</u> address(es) of the e business under the assumed business name: <u>Name</u> Kuthy a. Sullivan 2505	entity or individual(s) doing <u>Complete Address</u>
3. The general type of business transacted under the	
Retail Trade Transportation and Pu Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: <u>Kathy A. Sullivan</u> 2505 W. Marieway Meridian, TD. 83642	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): 884 - 8558
	Secretary of State use only
Signature: Kathea Sullian Printed Name: Kuthaa Sullivan Capacity:	idaho secretary of state
(see instruction # 8 on back of form)	10/22/2001 05:00 CK: 2527 CT: 152712 BH: 425641 1 @ 20.00 = 20.00 ASSUM NAME #
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