

## CELLIFICATE OF ASSUMED BUSINESS NAME

FILED/EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2007 DEC 71 AM 8: 39

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

<ol><li>The true name(s) and <u>business</u> a business under the assumed busi</li></ol>	ddress(es) of the entity or individual(s) doing
Name	Complete Address
Ryan J. Hale	188 South Main, Soda Springs, ID 83276
Marilyn C. Hale	188 South Main, Soda Springs, ID 83276
Retail Trade Trar Wholesale Trade Cor	Name and \$20.00 fee to:  Secretary of State
Ryan J. Hale  2418 Valley View Road  Soda Springs, ID 83276	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol><li>Name and address for this ackn copy is (if other than # 4 above):</li></ol>	owledgment Phone number (optional):
	Secretary of State use only