CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDATOED/EFFECTIVE
Pursuant to Section 53-504, Idaho Code, the undersioned gives notice of adoption of an Assumed Business Name.

1.	The assumed business name which the up business is:	undersigned use(s) in the transaction of the state of 10AHO
2.	The true name(s) and business address(e business under the assumed business name Name Name BEV W, I Jams	(es) of the entity or individual(s) doing ame is/are: Complete Address 4596 Dye Lane, Kuna, ID 83634 3335 E. Country Lanc Kuna To 83634
3.	The general type of business transacted under (mark only those that apply) Retail Trade Manufacturing Myholesale Trade Agriculture Construction	ring Transportation and Public Utilities Finance, Insurance, and Real Estate
4.	The name and address to which future correspondence should be addressed: Sue MAROSTICA 4596 Dye Lane Kuna, ID 83634	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	700 West Jefferson
Ciamat.	Ire: Due Marostra	Secretary of State use only 19940 SECKETARY OF STATE 44/28/29949 69349
	/	CK: 8387 CT: 138398 BH: 313321
Printed	Name: <u>SUE MAROSTICA</u>	1 0 20.00 = 20.00 ASSUM NAME # 4
Capaci	ty: Owner (see instruction # 8 on back of form)	35376