

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.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

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The assumed business name which the under business is:	SECULATE STATE STA
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name André Leach	of the entity or individual(s) doing: Complete Address 2090 W. Swallow fail PL Lampa ID 83686
3. The general type of business transacted under Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: André Leach 240 W. Enalla Hail Pt. Nampa TO 8316810	Submit Certificate of Assumed Business Name and \$25.00 fee to: 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): (208) 400 249-2737
Signature: <u>André Seach</u> Printed Name: <u>André Leach</u> Capacity/Title: <u>Protographer</u>	Secretary of State use only IDAHO SECRETARY OF STATE 96/97/2005 95:00 CK: 3234 CT: 158818 BH: 814678 1 8 25.60 = 25.60 ASSUM MARE # 2