

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filling a certificate of Assumed Business Name 55 SEP 29 At 9: 07

Please type or print legibly. NOTE: See instructions on reverse before filing.

	NOTE: See instructions on reverse before	re filing. SECRETAIN OF STATE STATE OF CASO
1.	The assumed business name which the und business is:	dersigned use(s) in the transaction of
2.	The true name(s) and business address(es business under the assumed business name Name Riley Della Lucia Emilie Della Lucia	
3.	The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	der the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed: Riley Della Lucia 1805 East Overland Dr #422 Meridian, 10 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 acknowledgme copy is (if other than # 4 above):	Phone number (optional): 209 769-6745
		Secretary of State use only

Printed Name: Y

Capacity/Title:

Signature:_

(see instruction #8 on back of form)

IDAHO SECRETARY OF STATE
09/29/2005 05:00
CK: 1274 CT: 156018 BH: 914200
0 25.00 = 25.00 ASSUM NAME # 2

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