

Capacity/Title: Owner

(see instruction # 8 on back of form)

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.

200 AN 9: 21 Please type or print legibly.

NOTE: See instructions on reverse before fili	ng.
The assumed business name which the undersign business is: The assumed business name which the undersign business is: The assumed business name which the undersign business is: The assumed business name which the undersign business is: The assumed business name which the undersign business is: The assumed business name which the undersign business is: The assumed business name which the undersign business is: The assumed business name which the undersign business is: The assumed business is:	gned use(s) in the transaction of
Holy Smokes tirewood	
2. The true name(s) and business address(es) of the business under the assumed business name: Name Alau L. Thompson Oralie F Thompson Alau L. Thompson	ce entity or individual(s) doing Complete Address Complete Address Congeville Id. 835 Congeville Id. 83530
3. The general type of business transacted under th	e assumed business name is:
Retail Trade Transportation and F Wholesale Trade Construction Services Agriculture	
ManufacturingMiningFinance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
 The name and address to which future correspondence should be addressed: 	Secretary of State 700 West Jefferson
Rt 2 hox 555	Basement West PO Box 83720
Geangeville, Id. 83530	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
topy to (it offer than # 4 above).	(203) 983-2824
	Secretary of State use only
Signature: Man L. Thompson	
rillied Name: Han L. Thompson	IDAHO SECRETARY OF STATE 01/21/2004 05:00

IDAHO SECRETARY OF STATE **01/21/2004 05:00**CK: 4314 CT: 158910 BH: 722667 1 8 25.00 = 25.00 ASSUM MANE # 2