

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

2002 AUG 15 AM 9: 09

| Please type or print legion. | α. |
|---|--|
| NOTE: See instructions on reverse before filing | |
| The assumed business name which the undersign | - dura(a) in the transaction of 10 |
| 1. The assumed business name which the undersign | ned use(s) in the transconorrer |
| | |
| pusitiess is. | .05 |
| LADCO Specialt | 163 |
| | on entity or individual(s) doing |
| 2. The true name(s) and business address(es) of the | le entity of maintained |
| business under the assumed business name: | Complete Address |
| Name | Complete Address |
| a MiAana 4 | 4246 Old ahsahka Cora |
| Carmen O'Hara | |
| | 83500-9706 |
| | 4.5500 7.10 |
| | LL -i nomo is: |
| The general type of business transacted under the second control of the second cont | he assumed business name is. |
| 3. The general type of business transcript | n bus I willian |
| Retail Trade Transportation and | Public Utilities |
| Retail Trade | |
| VVI loiesale Trado | Submit Certificate of |
| Oc. viece | Assumed Business |
| Manufacturing Mining | Name and \$20.00 fee to: |
| Finance, Insurance, and Real Estate | Trainio di la Taranta |
| | Secretary of State |
| 4. The name and address to which future | 700 West Jefferson |
| correspondence should be addressed: | Basement West |
| | PO Box 83720 |
| LADCO | Boise ID 83720-0080 |
| 4246 Old ahsahkaCorac | Le 208 334-2301 |
| ahsahka 1083520 | |
| 00,00 | Phone number (optional): |
| Name and address for this acknowledgment | |
| COPY IS (if other than # 4 above). | 208-476-7800 |
| | |
| | Secretary of State use only |
| | |
| | 182 |
| | व प्रा |
| and Olahan | 000 000 000 000 000 000 000 000 000 00 |
| Signature: (signature required) | S S S S S S S S S S S S S S S S S S S |
| Printed Name: CARMEN O'Hava | IDAHO SECRETARY OF STATE OB/15/2002 05:00 OB/15/2002 05:00 |
| Printed Name: CARMEN CHAVA | CKI 1 UI: LOUGH HAME & O |
| Capacity/Title: 0 wher | 1 9 20.80 = 28.00 ASSUM NAME # C |
| (see instruction # 8 on back of form) | J9 140) |