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

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the unders@nedY -3 AH 10: 03

	gives notice of adoption of an Assumed Business Name.	
1.	The assumed business name which the undersigned use(s) in the transaction of business is:	
	Junnyside Sinclair	TIST TO THE TOTAL THE TOTAL TO THE TOTAL TOT
2.	The true name(s) and business address(es) of the entity or individual(s) deing business under the assumed business name is/are:	
		Uneck Pol Downer For Example
	Shelley Vaughan 6462	Can
3.	The general type of business transacted under the assur	Elm Street Lava Td 8323 83246 med business name is:
	(mark only those that apply)	
		nsportation and Public Utilities ance, Insurance, and Real Estate ing
4.	The name and address to which future Phone number (optional): 776 - 9942 correspondence should be addressed:	
	PD. Box 385 Lava Hot Springs, Id	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West
	To the than # 4 above).	PO Box 83720 Boise ID 83720-0080 208 334-2301
		Secretary of State use only
	Servision 297	IDANO SECRETARY OF STATE 85/64/2006 69:68

Signature:

Printed Name: _

Capacity:_

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