

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.

05 MAY -9 AM II: 32

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECREMAN OF STATE STATE OF IDAHO

1. The assumed business name which the u business is: _ ெல்ல கால் குல்ல கோல் கால் கால் கால் கால் கால் கால் கால் கா	indersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(e business under the assumed business na Name Amanda Turner	es) of the entity or individual(s) doing me: Complete Address 3333 Acke LANE Boise 10 83704
3. The general type of business transacted use Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: AMANDA TORRE BOISE D 83704 5. Name and address for this acknowledgme copy is (if other than # 4 above):	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
Signature: Next June (signature required)	Secretary of State use only
Printed Name: AMANDA K. TURNER Capacity/Title: OWNER (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 95/09/2005 05:00 CK: 943 CT: 158018 BH: 809267 1 8 25.00 = 25.00 ASSUM NAME # 2