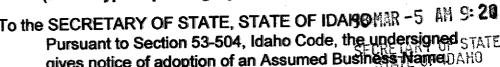
Capacity: <u>Au</u>

(see instruction # 8 on back of form)

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





Pursuant to Section 53-504, Idaho Code, the undersign gives notice of adoption of an Assumed Business man	REDAHO
1. The assumed business name which the undersigned used business is:  Ni-County Proporty Mainte	(s) in the transaction of
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:    Name   N	
Kymberty j. Lewis. 217 N. 230	05 31 Anthony 8344
3. The general type of business transacted under the assumed business name is:  (mark only those that apply)	
	nsportation and Public Utilities ance, Insurance, and Real Estate ing
The name and address to which future Phone number correspondence should be addressed:	(optional): 208 958-911 7
Eymberly Lowid.	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 PO Box 83720 Boise ID 83720-0080
	Secretary of State use only
Signature	03/05/1998 09:00 CK: 449 CT: 95210 BH: 87664 1 B 20.80 = 20.00 ASSUM NAME.
Printed Name: Kum Dorthy Lewis 3	0107 0

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