Printed Name: Mish

Capacity/Title:__

UWNES

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

CERTIFICATE OF ASSUMED BUSINESS NAM Pursuant to Section 53-504, Idaho Code, the under submits for filing a certificate of Assumed Business Please type or print legibly. NOTE: See instructions on reverse before filing	rsigned Name.
The assumed business name which the undersign business is: Ounty!	ned use(s) in the transaction of
2. The true name(s) and business address(es) of the business under the assumed business name: Name Name Name The general type of business transacted under the second	Complete Address 705 E 1St MM-LT TD 83617
Retail Trade Transportation and F Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed: Mishell Chemobie 705 E 154 Emmett ID 83417	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
Signature: M (signaturerequired) (signaturerequired)	Secretary of State use only

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IDAHO SECRETARY OF STATE

10/02/2002 05:00

CK: 3361 CT: 158010 BH: 524600
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