| 27   | EILED EEECTIVE   |
|--|--|
| CERTIFICATE OF   |  |
| ASSUMED BUSINESS NAME<br>Pursuant to Section 53-504, Idaho Code, the undersign<br>submits for filing a certificate of Assumed Business Name            | ed 2003 FED 20 FR 2-01<br>ne.  |
| Please type or print legibly.<br>NOTE: See instructions on reverse before filing.  | SEURLEARY OF STATE<br>STATE OF IDAHO   |
| 1. The assumed business name which the undersigned use(s) in the transaction of business is:   |  |
| <ol> <li>The true name(s) and business address(es) of the entity or individual(s) doing<br/>business under the assumed business name:</li> </ol>       |  |
| Sorah M. Bratley 2614  | N. 31st St., Boise 1 D 83703   |
| 3. The general type of business transacted under the assumed business name is:   |  |
| <ul> <li>Retail Trade</li> <li>Transportation and Pub</li> <li>Wholesale Trade</li> <li>Construction</li> <li>Services</li> <li>Agriculture</li> </ul> | lic Utilities<br>Submit Certificate of   |
| Manufacturing Mining<br>Finance, Insurance, and Real Estate  | Assumed Business<br>Name and <b>\$20.00</b> fee to:  |
| 4. The name and address to which future correspondence should be addressed:  | Secretary of State<br>700 West Jefferson<br>Basement West  |
| Sarah M. Bratley<br>21614 N. 51st St.<br>Boise, ID 83703-5441  | PO Box 83720<br>Boise ID 83720-0080<br>208 334-2301  |
| <ol> <li>Name and address for this acknowledgment<br/>copy is (if other than # 4 above):</li> </ol>  | Phone number (optional):<br>(208) 343-0624   |
|  | Secretary of State use only  |
| Signature: Solution (signature required)<br>Printed Name: Socoh M. Evottey<br>Capacity/Title: Owner Operator<br>(see instruction # 8 on back of form)  | IDAHO SECRETARY OF STATE<br>02/26/2003 05:00<br>CK; 2168 CT: 158819 BH: 665231<br>1 0 20.00 = 20.00 ASSUM NAME 1 |
|  | N 62892  |