

CERTIFICATE OF ASSUMED BUSINESS NAME FILE OVERFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

02 JUN -3 AM 8: 46

Please type or print legibly. NOTE: See instructions on reverse before filing.

STATE OF STATE

The assumed business name which the unbusiness is: Bolse Laser 2. The true name(s) and business address(es) business under the assumed business name Name Name Nam	of the entity or individual(s) doing
Casey R. Harlan	3024 W. RAVENHURST
	MERIDIAN ILD
	83642
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture	der the assumed business name is: and Public Utilities Submit Certificate of
ManufacturingMiningFinance, Insurance, and Real Estate	Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed: Casey R. Harlan 3024 W. RAVENHURST MERIDIAN, 10 \$83642	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgmer copy is (if other than # 4 above): 	Phone number (optional): 208-713-0708
Signature: Casey R Harlan Printed Name: CASEY R. Harlan Capacity/Title: Owner PRESIDENT	Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE 66/03/2002 05:00 CK: CASH CT: 150018 BH: 46967 1 8 20.00 = 20.00 ASSUM NAME # 2