

Signature:

Printed Name: 4

Capacity/Title: <u>クタッケン</u>

(see instruction #8 on back of form)

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.

08 NOV 19 AM 8: 49

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

The true name(s) and business address(es) of business under the assumed business name: Name	of the entity or individual(s) doing Complete Address
	Same as below
Wholesale Trade Construction	and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Henra Lavruso	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
Formus Fare Ja8	(208) 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	t

IDAHO SECRETARY OF STATE

11/19/2008 05:00

CK: 3455 CT: 158010 BH: 1145138

25.00 = 25.00 ASSUM NAME # 2

D126390