

Capacity/Title:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

03 MAR 27 PM 3: 34

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The true name(s) and <u>business</u> address(es) of the	entity or individual(s) doing
business under the assumed business name: Name Number Fuhriman 1719	Complete Address Amari Vo Ct. Numba In.
	- rota (av Oc. marga 41)
. The general type of business transacted under the	assumed business name is:
Retail Trade Transportation and Pu Wholesale Trade Construction	blic Utilities
	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$20.00 fee to:
The name and address to which future	Secretary of State 700 West Jefferson
correspondence should be addressed:	Basement West
11195. Amarillo Ct. Nampa FD 83686	PO Box 83720 Boise ID 83720-0080
100017430 713 03666	208 334-2301
	Phone number (optional):
	461-9110
5. Name and address for this acknowledgment copy is (if other than # 4 above):	401-1110
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State use only

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IDAHO SECRETARY OF STATE

03/27/2003 05:00

CK: 1115 CT: 158010 BH: 671269
1 0 20.00 = 20.00 ASSUM NAME # 2

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