CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 09 APR -6 AM 8: 46 submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

SPORT COAT	
The true name(s) and business address(es) business under the assumed business name Name BEN BUCHANAN	_
The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720
BEN BUCHANAN	Boise ID 83720-0080
10212 W. CAPELLA	(208) 334-2301
STAR, ID 83669	
Name and address for this acknowledgment copy is (if other than #4 above):	nt
	Secretary of State use only

Profittischen tormange Pervised 04/2003

Signature:

(eignature required)

Printed Name:

BEN BUCHANAN

Capacity/Title:

OWNER

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

04/06/2009 05:00

CK: 1847 CT: 158818 BH: 1164615
1 0 25.00 = 25.00 ASSUM MANE #

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