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CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)	
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name, IDAHO	
 The assumed business name which the un business is: 	
 The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: 	
Name	Complete Address
RON WALSH	79 AIKENS ST EAGLE, JOAHO
3. The general type of business transacted under the assumed business name is: (mark only those that apply)	
Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): 939-8773	
correspondence should be addressed: RON WALSH	
79 AIKENS ST	Submit Certificate of Assumed Business Name and \$20.00 fee to:
FAGLE IO 83614 5. Name and address for this acknowledgmer copy is (if other than to 4 above):	700 West Jefferson
	BAND BECRETARTOP STATES
	68/26/1999 09:00 (K: 1633 CT: 117559 BH: 245246
Signature:	
Printed Name: RON WALSH	D28701
Capacity: <u>ひいいまえ</u> (see instruction # 8 on back of form)	107870/