

CERTIFICATE OF ASSUMED BUSINESS NAME 011

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

OI APR 25 PM 2: 13
SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersigned use(s) in the transaction of business is:	
 The true name(s) and <u>business</u> address(es) of the e business under the assumed business name: Name Chris Linford Brad Linford The general type of business transacted under the 	Complete Address 16 Envin Ct. 2ho Falls, ID 83401
Retail Trade	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above): Phone number (optional): (208) 523 - 253 7	
	Secretary of State use only
Sgd'u	IDANO SECKETARY OF STATE
Signature: Signature: 1000	64/26/2661 69:68 CK: 151 CT: 145552 BH: 393399
District listant	1 # 28.88 = 28.86 ASSUM NAME # 2
Capacity: Owner (see instruction # 8 on back of form)	D44785