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CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly) 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.	
 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 	
Martin D. Grev 6	558 W. Conti Dr. Post Falls ID 83854
Crystal L. Grey 6	58 W. Conti Dr. Post Falls, ID 83854
 The general type of business transacted under the assumed business name is: (mark only those that apply) 	
Retail Trade Danufacturing Wholesale Trade Agriculture Services Construction	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4. The name and address to which future	
correspondence should be addressed:	Submit Certificate of
	Assumed Business
658 W Canti Or.	Name and \$20.00 fee to:
Post Falls, IN 83854	Secretary of State
5. Name and address for this acknowledgmer	700 West Jefferson Basement West
COPY IS (if other than # 4 above):	PO Box 83720 Boise ID 83720-0080
	208 334-2301
· · · · · · · · · · · · · · · · · · ·	
	Sec 90000 GEORETARY® OF ¹⁸ TATE 02/28/2000 09:00 CK: 2169 CT: 127296 BH: 293657
Signature: Martin D. Mrey	
	T CO.00 - CO.00 HOSUN NAME # 2
Printed Name: Martin D. Grey	B33540
(see instruction # 8 on back of form)	
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