

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned 7006 AUG 28 AM 8: 58 submits for filing a certificate of Assumed Business Name.

| STATE OF IDAHO undersigned use(s) in the transaction of  |
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|  |
| (es) of the entity or individual(s) doing ame:  Complete Address  7622 Robinson kuna, TD 83634  330/ S. Eagle Rd Kuna, TD 83634  |
| under the assumed business name is:  |
| Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301  Phone number (optional): |
| Secretary of State use only  |
|  |

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