



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED

JUL 9 3 09 PM '99

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.

1. The assumed business name which the undersigned use(s) in the transaction of business is:
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name SAMANTHA L. Huskinson Complete Address 101 S. ORCHARD
BOISE, IDAHO 83705

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 correspondence should be addressed: Phone number (optional): _____

SAMANTHA L. Huskinson
8954 Austin St.
Boise, IDAHO 83714

5. Name and address for this acknowledgment copy is (if other than # 4 above):

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

Secretary of State use only

IDaho SECRETARY OF STATE

07/09/1999 09:00
CX: 1250 CT: 117822 BH: 232676

1 E 20.00 = 20.00 ASSUM NAME # 2

Signature: S. L. Huskinson

Printed Name: SAMANTHA L. Huskinson

Capacity: Same

(see instruction # 8 on back of form)