FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse befor	e filing.
1. The assumed business name which the und business is: Wool Rim Properti	
2. The true name(s) and business address(es) business under the assumed business nam Name	of the entity or individual(s) doing e: Complete Address M: Kz J. Picznski
Box 6053 Kerryson (20	BOX 6186 KeTCHOM, IO
83340	83340
3. The general type of business transacted un	der the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Wood Rive Properties Box 3443 Kercus TO 83340 5. Name and address for this acknowledgme copy is (if other than #4 above):	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): 28-39-19-1/208-720-4007
	Secretary of State use only
Signature: Printed Name: Capacity/Title: (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE