

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersignate FEB 17 AM 9: 21

Please type or print legibly. NOTE: See instructions on reverse before filing.	STATE OF IDAHO
The assumed business name which the undersigned business is:	
The true name(s) and business address(es) of the business under the assumed business name: Name Cincly Larray Rekow 10 Larray	entity or individual(s) doing Complete Address
The general type of business transacted under the	
Retail Trade Transportation and Put Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson
Cindy L. Rekow 60 Maranatha In Lowman Sdalu 83637	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): 208-259-3420
ature:	Secretary of State use only

Printed Name: UCindy L. ReKow Capacity/Title: 50/e (see instruction #8 on back of form)