

Printed Name: Olego

(see instruction # 8 on back of form)

Capacity/Title:_/)\

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2007 FEB 14 AM 8: 54

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SEGRETARY OF STATE STATE OF IDAHO

The assumed business name which the un business is:	ansigned use(s) in the transaction of
The true name(s) and business address(est business under the assumed business name Name Olagario Villarral	
	nder the assumed business name is:
 Wholesale Trade Services Manufacturing Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Olegania Villannal Paray 120 Address ID 83210	★ Secretary of State ↓ 700 West Jefferson Basement West PO Box 83720 Broise ID 83720-0080 208 334-2301
Name and address for this acknowledgme copy is (if other than #4 above):	Phone number (optional): 208-569-1760
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IDAHO SECRETARY OF STATE

02/14/2007 05:00

CK: 125 CT: 209678 BH: 1033225

