Capacity:\_\_\_

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)  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 ECRETARY OF STATE  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) business under the assumed business name  Name	of the entity or individual(s) doing
Michael Frisbee BS	-NIITH E. Men Horne 1D 83647
3. The general type of business transacted under the assumed business name is:  (mark only those that apply)  Retail Trade	
Michael Frisbee  135 N. 11 F  Min Home. 1D 83647  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
Signature: Jehael Juskee  Printed Name: Michael Frisbee  Conneiture: Office of the state of the	Secretary of State use only  IDANO SECRETARY OF STATE  16/16/2000 39:00  CX: 1481 CT: 137228 BH: 354662  1 8 20.00 = 20.00 ASSUM NAME # 3