CERTIFICATE OF	FILED EFFECTIVE
	E
Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business N	ame/003 FEB 25 PM 2:07
Please type or print legibly. NOTE: See instructions on reverse before filing.	STATE
1. The assumed business name which the undersigne business is:	
SKIPROCK PRODUCT	
 The true name(s) and business address(es) of the obusiness under the assumed business name: 	entity or individual(s) doing
Name	Complete Address
PAUL MORROW	1014 E. WASHINGTON
	BOISE ID 83712
 Retail Trade Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: PAUL MORROW 1014 E. WASHINGTON BOISE ID 83712 Name and address for this acknowledgment 	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 Phone number (optional): 208-331-2375
COPY IS (if other than # 4 above).	200-001-2010
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STAT 222/25/2000.3 (25) CK: 903 CT: 150010 DH: 66 1 g 20.00 = 20.00 ASSUM M
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