| CERTIFICATE OF ASSUMED BUSINESS NA Pursuant to Section 53-504, Idaho Code, the under | FEECTIVE |
|---|--|
| ASSUMED BUSINESS NA | ME FILED EFTE |
| Pursuant to Section 53-504, Idaho Code, the unde | s Name. 2006 FEB - 1 AH 9: 24 |
| submits for filing a certificate of Assumed Business | Name. 2006 FEB - 1 AIT 5- 24 |
| Please type or print legibly. | 9. SECRETARY OF STATE |
| NOTE: See instructions on reverse before filing | STATE OF IDAHO |
| the underside | STATE OF TUP TO |
| The assumed business name which the undersign business is: | |
| - | |
| Snachergizer | |
| 2. The true name(s) and business address(es) of the | e entity or individual(s) doing |
| business under the assumed business name: | |
| Name | Complete Address |
| David Robert | |
| | 3730 Fruitland Lin # |
| | Copurdaliane ID 83815 |
| | a ansumed husiness name is: |
| The general type of business transacted under the | le assumed business name is. |
| 🕅 Retail Trade 🛛 🗌 Transportation and | Public Utilities |
| Wholesale Trade Construction | |
| Services Agriculture | Submit Certificate of |
| Manufacturing Mining | Assumed Business |
| Finance, Insurance, and Real Estate | Name and \$25.00 fee to: |
| | Secretary of State |
| The name and address to which future correspondence should be addressed: | 700 West Jefferson |
| | Basement West |
| David Robert | PO Box 83720 Boise ID 83720-0080 |
| 3730 Fruitland Lu | 208 334-2301 |
| Copurdation oID 83815 | |
| - | Phone number (optional): |
| Name and address for this acknowledgment COPY is (if other than # 4 above). | |
| | |
| | Secretary of State use only |
| | |
| | |
| Signature: Hauri March | 8 |
| Signature: | 027401 |
| Signature: <u>David</u> Roberts X Printed Name: <u>David</u> Roberts X Capacity/Title: <u>Owner</u> | Revised 04/2003 |
| Capacity/Title: Owner | IDANO SECRETARY OF STATE |
| (see instruction # 8 on back of form) | 02/01/2006 00:00 CK: 1100 CT: 150010 BH: 935483 |
| | 1 @ 25.89 = 25.68 ASSUM WANE # |
| | 1)96089 |