	CERTIFICATE OF ASSUMED BUSINESS NAME  (Please type or print legibly. See instructions on reverse)			
	CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reversions)  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 pame.  1. The assumed business name which the undersigned use(s) in the transaction of			
1.	business is:	ersigned use	e(s) in the transaction of	
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:			
	- J 1.	Com 80 x 59	nplete Address  1) 735 Hermannuk Rd  Sagle 1D	
	James Herrmann	Same	283860	
3.	The general type of business transacted und (mark only those that apply)	ter the assur	ned business name is:	
	□ Retail Trade       □ Manufacturing         □ Wholesale Trade       □ Agriculture         X Services       □ Construction	Fina		
4.	4. The name and address to which future correspondence should be addressed:			
	Tudy Herrmann Po Box. 591	·	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:	
5.	Sagle 1D 83860  Name and address for this acknowledgment	<b>t</b>	Secretary of State 700 West Jefferson Basement West	
	COPY is (if other than # 4 above):		PO Box 83720 Boise ID 83720-0080 208 334-2301	
		12/98	Secretary of State use only IDANO SECRETARY OF STATE  04/11/2969 09:00	
Signat	ure: Opedy Hermann	Revision 12/89	04/11/2000 09:00 X: 5498 CT: 129598 BH: 387688 1 8 28.68 = 28.88 ASSUM NAME # 2	
	d Name: Judy Herrmann	skabn.p85	D 34857	
Capad	(see instruction # 8 on back of form)	g:toorpitormslabn.p86		