CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO FILED/EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 8: 52 gives notice of adoption of an Assumed Business Name.

1.	The assumed business name which the und business is:	dersigned u	se(s)dhathedrainsad	joh 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:			
	Molly M. Mame	<u>Co</u>	omplete Address	
	<u> </u>	1015C,	ID 8370	5
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)			
	Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Fir	ansportation and Ponance, and Insurance, and insurance, and ining	
4.	The name and address to which future Progrespondence should be addressed:	none numbe	er (optional): 208-	336.7123
	5707 Sites Dr		Submit Certificate Assumed Busines Name and \$20.00	s
5.	Name and address for this acknowledgment	i.	Secretary of State 700 West Jefferso Basement West	
	COPY IS (if other than # 4 above):		PO Box 83720 Boise ID 83720-00 208 334-2301	80
		on 12/99	Secretary of State us IDANO SECRETARY OF ST	•

Signature:

Printed Name:

Capacity:

(see instruction # 8 on back of form)

Revision 12/99

orms\abn.p65

02/16/2001 09:00 CK: 5254 CT: 142362 BH: 379705

1 P 20.00 = 20.00 ASSUM NAME # 2

D43748