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TFL:208-788-5468

8:43 No.002 P.02 Jul 28 00

CERTIFICATE OF ASSI	UMED BUSINESS NAME
To the SECRETARY OF STATE, ST Pursuant to Section 53-504, Notice of adoption of an	. See Instructions property
Hassage on H	4. Rocks
The true name(s) and business address(business under the assumed business na Name	es) of the entity or individual(s) doing ame is/are: Complete Address
The neneral tyrie of husiness transacted (mark only those that apply) Retail Trade Manufacturi	inder the contimed business sees in the Transportation and Public Utilities
Wholesale Trade	Mining Phone number (optional);
correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$20.00 fee to:
Name and address for this acknowledgme copy is (if other than # 4 above):	700 West leffercon
	Secretary of State use only

Printed Name (see instruction # 6 on back of form)