

CERTIFICATE OF ASSUMED BUSINESS NAME

FEED/EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 32 FEB 21 Aii 9: 21

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

 The assumed business name which the business is: Selkirk Retrie 		
2. The true name(s) and <u>business</u> address business under the assumed business n Name MAHWAW S. (コルbら	ame:	ntity or individual(s) doing Complete Address Ranch Rd. Sagle, 83860
3. The general type of business transacted Retail Trade Transporta We Work Wholesale Trade Construct Services Agriculture Manufacturing Mining Finance, Insurance, and Real Est	ation and Pul ion e	
4. The name and address to which future correspondence should be addressed: Selkirk Retneurs 393 Ranch Rd. Sagle ID 83860	_	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledge copy is (if other than # 4 above). 	gment	Phone number (optional): 208-255-/098
	_	Secretary of State use only
Signature: <u>Mathew S. (7166</u> Printed Name: <u>Mathew S. (7166</u> Capacity/Title: Owner	Rewsed12/2001	IDAHO SECRETARY OF STATE Ø2/21/2002 Ø5=00 CK: 2035 CT: 157618 BH: 447490 1 8 20.00 = 20.00 ASSUM NAME # :