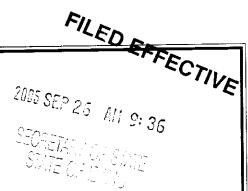


## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.



R C	1
The true name(s) and business address(es) of business under the assumed business name:	of the entity or individual(s) doing  Complete Address  205 Nez Perce Ave., Rexburg, ID 83440
3. The general type of business transacted unde	er the assumed business name is:
Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301  Phone number (optional):
William Forsberg  49 Professional Plaza	Secretary of State use only
Rexburg, ID 83440	
gnature:	forms/abi
inted Name:Alexander M. Chester	Remisean forms and occupant of the state of the state occupant of the state occupant
apacity/Title: Member (see instruction # 8 on back of form)	10000 SECRETARY OF STATE 100000 SECRETARY OF STATE 10000 SECRETARY OF STATE 100000 SECRETARY OF STATE 10000 SECRETARY OF STATE 100000 SECRETARY OF STATE 10000 SECRETARY OF STATE 10000 SECRETARY OF