## CERTIFICATE OF ASSUMED BUSINESS NAME

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

07 HAR 29 AM 10: 25

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECT SECRETARY OF STATE

business is:  SALE FORCE CONSTRU	
2. The true name(s) and <u>business</u> address(es) o business under the assumed business name:  Name  TRACY Galy	f the entity or individual(s) doing  Complete Address  GR G9 N. HAPPy Valley Rd.  NAMPA IO. \$3687
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Same	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
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208-250-286)
Signature:  Signature:  Signature:  Signature required)  FRACY Gale  Capacity/Title:  (see Instruction # 8 on back of form)	Secretary of State use only  SECRETARY OF STATE  1DAHO SECRETARY OF STATE  23/29/2007 05:00  CK: CASH CT: 158618 BH: 1043488  1 2 25.90 = 25.90 ASSUM MANE # 2

D109891