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CERTIFICATE OF ASSUMED BUSINESS NA Pursuant to Section 53-504, Idaho Code, the under submits for filing a certificate of Assumed Business	s Name. 02 AUG 22 PM 1:14
Please type or print legibly.     State       NOTE: See instructions on reverse before filing.     STATE OF IDAHO	
1. The assumed business name which the undersigned use(s) in the transaction of business is: Indian Cove Enterprises	
2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: <u>Name</u> <u>Sari Trompke</u> <u>Ronald L. Trompke</u> <u>L291 W. Newfield Dr. Eagle ID 836/6</u> <u>L291 W. Newfield Dr. Eagle ID 836/6</u>	
<ul> <li>3. The general type of business transacted under the services and the service and the service</li></ul>	
Signature: <u>Mu</u> (signature: <u>Mu</u> (signature redified) Printed Name: <u>SARI</u> <u>TROMPKE</u> Capacity/Title: <u>OUNER</u> (see instruction # 8 on back of form)	Secretary of State use only IDAMO SECRETARY OF STATE 08/22/2002 05:00 CK: 3909 CT: 158010 BH: 484234 1 8 20.00 = 28.00 ASSUM NAME # 2 The state of the state