

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

09 MAY -4 AM 8: 57

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SOLE PROPRIETOR

(see instruction # 8 on back of form)

Capacity/Title:

The true name(s) and business address(es) of the business under the assumed business name: Name AMIL QUAYLE The general type of business transacted under the Retail Trade Transportation and Putholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Complete Address PO BOX 1 ST ANTHONY, ID 83445 assumed business name is:	
 ✓ Retail Trade ✓ Wholesale Trade ✓ Construction ✓ Agriculture ✓ Manufacturing ✓ Mining 	Submit Certificate of Assumed Business	
The name and address to which future correspondence should be addressed:	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080	
PO BOX 1	(208) 334-2301	
ST ANTHONY, ID 83445		
5. Name and address for this acknowledgment copy is (if other than #4 above): BANK OF IDAHO		
PO BOX 126	Secretary of State use only	
ST ANTHONY ID 83445 ature: (signature required) AMIL QUAYLE		

IDANO SECRETARY OF STATE 05/05/2009 05:00 CK: 44758 CT: 158818 BH: 1168957 1 9 25.69 = 25.69 0858M MONE # 2

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