227		
CERTIFIC		FILED EFFECTIVE
Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 05 0CT 25 AM II: 19		
Please type or print legibly.SECRETARY OF STATENOTE: See instructions on reverse before filing.STATE OF IDAHO		
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:		
(DETTSUM		·
2. The true name(s) and business address(es) of the entity or individual(s) doing		
business under the assumed business name:		
Name		Complete Address
GilHaskins-Hartwell 2635-EApricot CRT.		
Meridian ID 5360		ridian ID 83646
3. The general type of business transacted under the assumed business name is:		
Retail Trade Transportation and Public Utilities		
	Construction	
	Agriculture	Submit Certificate of
Manufacturing 🗌 I	Vining	Assumed Business
Finance, Insurance, and		Name and \$25.00 fee to:
4. The name and address to whi	ch future	Secretary of State
correspondence should be addressed: \underline{Same}		700 West Jefferson
		Basement West PO Box 83720
		Boise ID 83720-0080
	<u></u>	208 334-2301
5 Nome and address for this a	eknowledgment	Phone number (optional):
 Name and address for this ac CODY IS (if other than # 4 above): 	LINNEUGHEIU	· · · · · · · · · · · · · · · · · · ·
		Secretary of State use only
Plan ol-	fatty 10/1/ 20	
Signature: (Ifthe ICon & I and Tell) B		
Printed Name: <u>C1 Haskins-Hartwell</u> 10/25/2006 05:00 CK: 947988 CT: 172899 BH: 987889 1 25.88 = 25.88 ASSIN NOVE = 2		
Capacity/Title: <u>OWNER</u>		
(see Instruction # 8 on back of form	ו) 🎽 .	D 114987