

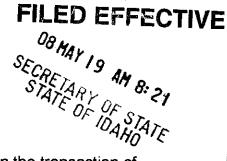
CERTIFICATE OF ASSUMED BUSINESS NAME

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.

(see instruction # 8 on back of form)



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 The assumed business name which the under business is: ちどいてaxi 	•
2. The true name(s) and business address(es) of business under the assumed business name Name Marian Wilson Gary Smith	, , ,
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: SENTOREMENT 936 EIVA Takko Falls 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
Signature: <u>Jacey</u> Smith (signature required) Printed Name: <u>Gary</u> Smith Capacity/Title: Owner	Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE O5/19/2008 O5:200 CK: 5757639843 CT: 158010 BH: 1115604 1 8 25.80 = 25.88 ASSUM NAME # 2