

CERTIFICATE OF FILED EFFECTIVE ASSUMED BUSINESS NAME

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETAL AL UTATI STAIR LE BIRO

IN f	IY ROOM ACCENTS
The true name(s) and business addr business under the assumed busine Name PAULETTE MINATRE	ess(es) of the entity or individual(s) doing is name: Complete Address 20352 N GUNNING RD RATHDRUM, ID 83858
	ted under the assumed business name is: rtation and Public Utilities
Services Agricul Manufacturing Mining Finance, Insurance, and Real	Assumed Business
The name and address to which futu correspondence should be addressed PAULETTE MINATRE	,
20352 N GUNNING RD RATHDRUM, ID 83858	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledge copy is (if other than #4 above).	edgment Phone number (optional): 208-687-2080
	Secretary of State use only
ature: ////////////////////////////////////	Secure S
pacity/Title: OWNER (see instruction # 8 on back of form)	IDAHO SECRETARY OF STA 12/18/2006 05 CK: 1215 CT: 158010 BH: 10 1 8 25.00 = 25.00 ASSUM N