



# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned  
gives notice of adoption of an Assumed Business Name.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Zero Limitz

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name: MarJean Silvester Complete Address: HC 65 Box 423  
3761 Moose Breath Ln.  
Island Park, ID

83429

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): 208-558-7505

Same as Above

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Same as Above

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only

IDaho SECRETARY OF STATE

06/04/2001 09:00  
CK: 1683 CT: 147152 BH: 400699

1 E 20.00 = 20.00 ASSUM NAME # 2

045775

Signature: MarJean Silvester

Printed Name: MarJean Silvester

Capacity: Owner

(see instruction # 8 on back of form)