Capacity/Title: //wner

(see instruction # 8 on back of form)

FILED EFFECTIVE

CERTIFICATE OF

ASSUMED BUSINESS NAME OF SEP 23 AM 9: 10 Pursuant to Section 53-504, Idaho Code, the undersigned

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

1. The assumed business name which the undersigned use(s) in the transaction of business is: Lountry Peddler Antiques 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 Name Complete Address Policy R. B. VRNS Policy R. B. VRNS Policy R. B. VRNS Complete Address Retail Trade Transportation and Public Utilities Wholesale Trade Agriculture Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Manufacturing Mining Finance, Insurance, and Real Estate 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): Secretary of State use only	NOTE: See instructions on reverse be	fore filing.
Submit Certificate of Assumed Business name and address to which future correspondence should be addressed: Manufacturing Mining Secretary of State Too West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):	business is:	
Retail Trade	business under the assumed business na Name Mc/VIN R B YRNS Danna E B YRNS	Complete Address P.D. Bex 178 Middleton, Id. 83644
4. The name and address to which future correspondence should be addressed: Melvin By RNS	Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining	on and Public Utilities n Submit Certificate of Assumed Business Name and \$28.30 fee to:
COpy is (if other than # 4 above):	correspondence should be addressed: **MENN BYRNS** **PO. Box 178**	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
Secretary of State use only		nent Phone number (optional):
		Secretary of State use only
	m, i · O o	- 150 NO314
Signature: Melvin R. Byrns Printed Name: Melvin R. Byrns IDAHO SECRETARY OF 199/23/2004	(signature required)	IDAHO SECRETARY OF STA