

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 OCT 10 AM 9: 08

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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The assumed business name business is:	which the undersigne	ed use(s) in the transaction of	
- Hotink sou	reen Printin	7	
2. The true name(s) and business business under the assumed I Name  Mary M Hays  Keun FHays	business name:	entity or individual(s) doing  Complete Address  LUURYY)N MORCTO	) {\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
3. The general type of business t	ransacted under the a	assumed business name is:	
☐ Wholesale Trade ☐ C☐ Services ☐ A	ch future	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	
5. Name and address for this accopy is (if other than #4 above):	knowledgment		
		Secretary of State use only	
Signature:	g:\corpiforms\text{labn.pd5}	10/10/2008 CK: 1089 CT: 158010 B	STATE @5: @@ H: 1139610 SUM NAME # 2
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