227	
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:	E E
Public Secrets	E E T
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	Complete Address
Natália Bowens	1500 HORE Dr 2 1
Macgretes Bowens	9506 HOFF Dr.
 The general type of business transacted under the assumed business name is: (mark only those that apply) 	
Retail Trade I Manufactur Wholesale Trade Agriculture Services I Construction	Finance, Insurance, and Real Estate
 The name and address to which future correspondence should be addressed: 	Phone number (optional)
DATALIA Y. Bowens	Submit Certificate of Assumed Business
9500 HOFF Dr	Name and \$20.00 fee to:
Poise TD 83714	Secretary of State 700 West Jefferson
 Name and address for this acknowledger copy is (if other than # 4 above): 	nent Basement West PO Box 83720
	Boise ID 83720-0080 208 334-2301
	Secretary of State use only
	5 5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 3 2 2 3 2 3 2 3 2 3 2 3 3 2 3 3 2 3
Signature: <u>Alatia Bruens</u>	#2/08/2001 09:00 CK: CASH CT: 141978 BH: 377692
Printed Name: <u>NATATIA Y. Bowens</u> Capacity: <u>Sule proprietor</u>	월 1 월 20.08 = 20.00 ASSUM NAME # 2
(see instruction # 8 on back of form)	1 @ 28.00 = 20.00 ASSUM NAME # 2 D ムスケイン