Printed Name: Le andra

(see instruction # 8 on back of form)

Capacity:

CERTIFICATE OF ASSUMED BUSINESS NAM (Please type or print legibly. See instructions on reverse.) ave. 00 AUS 10 AN 10:22 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: Shire Enterprises 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name Leandra Reuble 2475 Devil Creak 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Manufacturing Transportation and Public Utilities Retail Trade Agriculture Finance, Insurance, and Real Estate Wholesale Trade Construction Mining Services Phone number (optional): 208-537-68/7 4. The name and address to which future correspondence should be addressed: Submit Certificate of Assumed Business Devil Creeke Rd Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** PO Box 83720 CODY IS (if other than # 4 above): Boise ID 83720-0080 208 334-2301 I provide the control of the control 08/10/2000 09:00 CK: 1925 CT: 134698 BH: 349355 Signature: Lecneton Merble 1 @ 28.98 = 28.00 ASSUM NAME # 2

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