CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the ur	nder	signe	d us	The second of th	Service that the service that the service the service that the service tha
	business is:	4			STATE OF	IDAHO T
-	VAL'S TRADING POST & SUPPLIE	ES_				
2.	The true name(s) and business address(es business under the assumed business name	ne is	s/are:	Ço	mplete Addres	SS
	VALERIE A. SAMUEL	P.O.	Вох	14	, NORDMAN,	iD. 83848
		-: '				
1						
3.	The general type of business transacted un	ndei	the a	ISSU	med husiness	
-	(mark only those that apply)					
		4 4		5 1		
- 	🛛 Retail Trade 🔲 Manufacturin	g		Tra	insportation a	nd Public Utilities
7.						
1	Wholesale Trade X Adriguiture	15		7 - 4	취임 유명박 병 그 씨는 용품의 그리다.	
	Wholesale Trade Agriculture Services Construction			Fin	ance, Insuran	ice, and Real Es
	☑ Wholesale Trade☑ Agriculture☑ Construction			Fin	취임 유명박 병 그 씨는 용품의 그리다.	
4.	☐ Services ☑ Construction	hor		Fin Mir	ance, Insuran ning	ice, and Real Es
	Services Construction The name and address to which future P	'hor	O O ne nun	Fin Mir	ance, Insuran ning	
	Services Construction The name and address to which future Properties of the correspondence should be addressed:	'hor	O Ie nun	Fin Mir	ance, Insuran ning	ice, and Real Es
	Services Construction The name and address to which future P	hor	le nun	Fin Mir	ance, Insuran ning	ice, and Real Esi
	Services Construction The name and address to which future Properties of the correspondence should be addressed:	'hor	le nun	Fin Mir	ance, Insuranting r (optional): (201 Submit Certif Assumed Bu	ice, and Real Est 8) 443 - 2210 ficate of siness
	Services Construction The name and address to which future F correspondence should be addressed: VALERIE A . SAMUEL P.O. Box 14	'hor	ie nun	Fin Mir	ance, Insuran ning r (optional): <u>(201</u> Submit Certi	ice, and Real Est 8) 443 - 2210 ficate of siness
	Services Construction The name and address to which future F correspondence should be addressed: VALERIE A . SAMUEL	hor	e nun	Fin Mir	ance, Insuranting r (optional): (201 Submit Certif Assumed Bu Name and \$2	ice, and Real Est 8) 443 - 2210 ficate of siness 20.00 fee to:
	Services Construction The name and address to which future F correspondence should be addressed: VALERIE A . SAMUEL P.O. BOX 14 NORD MAN, ID. 83848		e hun	Fin Mir	ance, Insuranting r (optional): (20) Submit Certif Assumed Bu Name and \$2	ice, and Real Est 8) 443 - 2210 ficate of siness 20.00 fee to:
5.44	Services Construction The name and address to which future Processor of the service of the serv		e nun	Fin Mir	ance, Insuranting r (optional): (201 Submit Certif Assumed Bu Name and \$2	ice, and Real Est (8) 443 - 2210 ficate of siness 20.00 fee to: State fferson
**************************************	Services Construction The name and address to which future F correspondence should be addressed: VALERIE A . SAMUEL P.O. BOX 14 NORD MAN, ID. 83848		e hun	Fin Mir	ance, Insuranting r (optional): (20) Submit Certif Assumed Bu Name and \$: Secretary of 700 West Je	ice, and Real Est 8) 443 - 2010 ficate of siness 20.00 fee to: State ffeison
5.44	Services Construction The name and address to which future Processor of the service of the serv		e hun	Fin Mir	Submit Certing Submit Certing Assumed Bu Name and \$2 Secretary of 700 West Je Basement W PO Box 8372 Boise ID 837	rice, and Real Est 8) 443 - 2210 ficate of lisiness 20.00 fee to: State fferson (est 20.0080
**************************************	Services Construction The name and address to which future Processor of the service of the serv			Fin Mir	Submit Certing Submit Certing Assumed Bu Name and \$2 Secretary of 700 West Je Basement W PO Box 8372	rice, and Real Est 8) 443 - 2210 ficate of lisiness 20.00 fee to: State fferson (est 20.0080
5.44	Services Construction The name and address to which future Processor of the service of the serv		le nun	Fin Mir	Submit Certif Assumed Bu Name and \$2 Secretary of 700 West Je Basement W PO Box 8372 Boise ID 837 208 334-230	ice, and Real Est 8) 443 - 2210 ficate of siness 20,00 fee to: State fferson /est 20
5. A	Services Construction The name and address to which future Processor of the service of the serv		e hun	Fin Mir	Submit Certing Submit Certing Assumed Bu Name and \$: Secretary of 700 West Je Basement W PO Box 8372 Boise ID 837 208 334-230	ice, and Real Est 8) 443 - 2210 ficate of listness 20.00 fee to: State fferson (est 20.00-0080 1
5. A	Services Construction The name and address to which future Processor of the service of the serv				Submit Certif Assumed Bu Name and \$2 Secretary of 700 West Je Basement W PO Box 8372 Boise ID 837 208 334-230 Secretary of St. IMHO SECRETARY	ice, and Real Est 8) 443 - 2210 ficate of siness 20,00 fee to: State fferson (est 20 - 0080 1
5.4	Services Construction The name and address to which future Proceed to the standard process of the sta				Submit Certing Submit Certing Assumed Bu Name and \$: Secretary of 700 West Je Basement W PO Box 8372 Boise ID 837 208 334-230	ice, and Real Est 8) 443 - 2210 ficate of siness 20.00 fee to: State fferson /est 20 20-0080 1 tate use only 0F STATE 9 09:00
5.4	Services Construction The name and address to which future Processor of the addressed: VALERIE A. SAMUEL P.O. Box 14 Nord MAN, ID. 83848 Name and address for this acknowledgment copy is (if other than # 4 above):				Submit Certif Assumed Bu Name and \$2 Secretary of 700 West Je Basement W PO Box 8372 Boise ID 837 208 334-230 Secretary of St. 1846 SECRETARY	ficate of siness 20.00 fee to: State fferson rest 20 20 - 0080 1
5. % natu	The name and address to which future F correspondence should be addressed: VALERIE A . SAMUEL P.O. BOX 14 NORD MAN, ID. 83848 Name and address for this acknowledgmen copy is (if other than # 4 above): re: Yellie Q . Samuel	Revision 1/88			ance, Insuranting r (optional): (201 Submit Certif Assumed Bu Name and \$2 Secretary of 700 West Je Basement W PO Box 8372 Boise ID 837 208 334-230 Secretary of St	ficate of siness 20.00 fee to: State fferson rest 20 20 - 0080 1
5.34 1.35 1.35 1.35 1.35 1.35 1.35 1.35 1.35	Services Construction The name and address to which future Proceed to the standard process of the sta				Submit Certif Assumed Bu Name and \$2 Secretary of 700 West Je Basement W PO Box 8372 Boise ID 837 208 334-230 Secretary of St. 1846 SECRETARY	ice, and Real Est 8) 443 - 2210 ficate of siness 20.00 fee to: State fferson (est 20 1 tate use only 0F STATE 9 69 80 7443 MH: 227295

(see instruction # 8 on back of form)