## 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 SEP 18 PM 2: 21

	gives notice of adoption of an A	Assumed Busi	ness Name.
1.	The assumed business name which the L business is:	ındersigned us	se(s) in the transaction of STATE
	Skandia Properties of America	···········	
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	<u>Name</u>		mplete Address
			08 N.,
		Idaho Fall	s, ID 83401
3.	The general type of business transacted under the assumed business name is:  (mark only those that apply)		
	(mark only those that apply)		
	Retail Trade Manufacturing Transportation and Public Utilities		
	☐ Wholesale Trade ☐ Agriculture ☐ Finance, Insurance, and Real Estate		
	Services Construction	ı 🗌 Mir	ning
4.	The name and address to which future Phone number (optional):		
	correspondence should be addressed:		
	Same		Submit Certificate of
			Assumed Business
			Name and <b>\$20.00</b> fee to:
			Secretary of State
c	Name and address for this calcoviladoms	.m.t	700 West Jefferson
Э.	Name and address for this acknowledgme copy is (if other than # 4 above):	ent	Basement West PO Box 83720
	copy is the other than # 4 above).		Boise ID 83720-0080
			208 334-2301
			Secretary of State use only
		12/89	IDAHO SECRETARY OF STATE
		evision 12/99	
		læ	09/18/2000 09:00

Signature:

Printed Name: KARIN

Capacity: Owner

(see instruction # 8 on back of form)

CK: 19107 CT: 136144 BH: 349131

1 8 20.88 = 28.88 ASSUM NAME # 2

D 39054