

CERTIFICATE OF ASSUMED BUSINESS NAME

CERTIFICATE OF ASSUMED BUSINESS I Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bus Please type or print legibly.	undersigned 9.30
NOTE: See instructions on reverse before	filing.
1. The assumed business name which the under business is: MABUHAY Unique Cift	ersigned use(s) in the transaction of
2. The true name(s) and business address(es)	
business under the assumed business name Name	Complete Address
GRACE L. ELHART	#375 San Matec ave.
	Kuna, Id. 83634
3. The general type of business transacted und	ler the assumed business name is:
Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Grace Elhart 375 San Mates Ove. Kuna Id 83634 5. Name and address for this acknowledgmer copy is (if other than # 4 above):	(208) 922-9604
ignature: (signature required) rinted Name: (SRACE L. ELHART (sapacity/Title: (see instruction # 8 on back of form)	Secretary of State use only Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE O1/05/2004 05:06 CK: 2817 CT: 158010 BH: 71986 1 @ 25.00 = 25.00 ASSUM NAME

D 71863