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

To the SECRETARY OF STATE, STATE OF IDAHO

04, Idaho Code, the undersigned 12 53 PM 98
f an Assumed Business Name. \$
Ng
ress(es) of the entity or individual(s) doing ss name is/are:
Complete Address [119] W. Amity Rd
Boise, Tol 83709
cted under the assumed business name is:
ture
re Phone number (optional):
Submit Certificate of Assumed Business Name and \$20.00 fee to:
Secretary of State 700 West Jefferson dgment Basement West
Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Secretary of State use only INNO SECRETARY OF STRIE
G8/14/1998 99:00 CK: CASH CT: 162752 MI: 136942 1 0 20.00 = 20.00 ASSUN NAME
D17496

Sign **Print** Cap

(see instruction # 8 on back of form)