

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. FILED EFFECTIVE

2006 JUN -9 AM 9: 05

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETABLE OF STATE

	OLUNE INSTITUTE OF STATE
1. The assumed business name which the under	ersigned use(s) in the transaction of
business is:	
Glorious IREA	SURE
2. The true personal and business address (a)	aftha en la santa la Santa
The true name(s) and business address(es) to business under the assumed business name	
Name	Complete Address
Taki II. NO	1547 Beach Rd PocatellalD.
T-MCRA S-1255 MCA	139/BEACH EN / WAILION
Lamara DE WES ITE	MKE 824. O. 11 100 2001
3. The general type of business transacted und	ler the assumed business name is:
Retail Trade Transportation a	and Public Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	
☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
 The name and address to which future correspondence should be addressed: 	Secretary of State 700 West Jefferson
	Basement West
1547 Beach Rd	PO Box 83720
<u> rocatello (D8320)</u>	Boise ID 83720-0080 208 334-2301
	250 004 2501
5. Name and address for this acknowledgmen	t Phone number (optional):
COpy is (if other than # 4 above).	2.08-6374112
	200 027700
	Secretary of State use only
	<u>n</u>
John for	le bri. pc
Signature: (signifure required)	42003
Printed Name: 76bi Flynn	Secure the state of the state o
Capacity/Title: <u>Co-owner</u>	d log
(see instruction # 8 on back of form)	06/09/2006 05:00
	CK: NO CKH CT: 201167 BH: 95910

25.00 ASSUM NAME # 2