

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

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

2005 MAY 26 81 8: 1.7

2. The true name(s) and business address business under the assumed business Name	ss(es) of the entity or individual(s) doing s name:
ALICE WERR	D.O. box 49 Hope, 10 83836
/	
ManufacturingMiningFinance, Insurance, and Real Es	Assumed Business
4. The name and address to which future correspondence should be addressed: ALICE WERY	,,
 Name and address for this acknowled copy is (if other than # 4 above). 	Igment Phone number (optional):
	Secretary of State use only
Signature: <u>AUU WW</u> (signature required) Printed Name: <u>ALICE WERR</u>	DAHO SECRETARY OF STATE
Capacity/Title: Owner (see instruction # 8 on back of form)	IDANO SECRETARY OF STATE 95/26/2005 05:00 CK: 2313 CT: 158010 BH: 61266 1 9 25.00 = 25.00 ASSUM MARE