

CERTIFICATE OF ASSUMED BUSINESS NAME

ZONCE OF PROCESS

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

SECHETARY OF STATE STATE OF IDAHO

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

The assumed business name which the und business is:	ersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Susan Sieben	of the entity or individual(s) doing e: <u>Complete Address</u> <u>POBUX 514</u> DOVER, Id. 83825
3. The general type of business transacted und Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Same as above	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above): Susan Sieben Po Bux 514 Dover, 1d 83825	Secretary of State use only
Signature: Suse Sube (signature required) Printed Name: Susan Sieben Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 3/27/2006 05 : 00 CK: 3806 CT: 158010 BH: 945784 1 @ 25.00 = 25.00 ASSUM NAME # 2

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