CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)	
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.	
1. The assumed business name which the undersigned use business is:	e(s) in the transaction of
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
Name /zquierd 1655	P 9 + L W e, SER II
The general type of business transacted under the assurance to the assurance transacted under transacted under the assurance transacted under transacted under the assurance transacted under the assurance transact	med business name is:
(mark only those that apply) Retail Trade Manufacturing, Transportation and Public Utilities	
Services Construction Mir	ance, Insurance, and Real Estate ning
4. The name and address to which future Phone numbe correspondence should be addressed: Pable Vz quierdo 1655 & 9+4 PD Box 54	Submit Certificate of Assumed Business
5. Name and address for this acknowledgment	Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West
copy is (if other than # 4 above): BQ: NX: Of the WEST	PO Box 83720 Boise ID 83720-0080 208 334-2301
100 Me 18 17 18 830 12 100 100 100 100 100 100 100 100 100	Secretary of State use only
rinted Name: Pablo Yzquierd :	IDANO SECRETARY OF STATE 03/17/2000 09:00 CK: 2120869231 CT: 68619 BH: 300095
(see instruction # 8 on back of form)	1 # 20.00 = 26.00 ASSUM NAME # 2

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