Capacity/Title:_

OWNER

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2006 SEP 11 AM 10: 44

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

Front Porch Printing	
. The true name(s) and business address(es business under the assumed business name Name Daniel C. Will Jr. Shelly L. Will	s) of the entity or individual(s) doing me: Complete Address 1509 Caldwell Blvd, suite 39B, Nampa, Id. 8365 1509 Caldwell Blvd, Suite 39B, Nampa, Id. 8365
The general type of business transacted under the Retail Trade	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
Name and address for this acknowledgmer copy is (if other than #4 above):	nt Phone number (optional): 208-697-4541
	Secretary of State use only

IDAHO SECRETARY OF STATE 09/11/2006 05:00 CX: 1149 CT: 158010 BH: 974438 1 8 25.00 = 25.00 ASSUM MANE # 2

