CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO



	uant to Section 53- notice of adoption				COLOR VIEW
1. The assubusiness		ne which the u	ındersigined u	ise(s) in the transac	tion of
	ountain View	Crown	Ann BRI	dge	
busin es s	under the assume Name A Johnson	ed business na	me is/are: <u>Co</u> 	ity or individual(s) do omplete Address No Huy, 91 Talu BRANT BCALCILO I	vn To 83245
	eral type of busine	ss transacted (under the ass	sumed business nan	ne is:
☐ Who	ail Trade X blesale Trade 🔲 vices 🗎	Manufacturi Agriculture Construction	☐ Fi	ransportation and P inance, Insurance, a lining	i
correspo	endence should be	addressed:	Phone numb	er (optional):	† · ·
195N.	Olo Huy, 91			Submit Certificate Assumed Busines Name and \$20.00	ss
Inkom	In. 83245	-		Secretary of State	
	nd address for this f other than # 4 above):	acknowledgme	Basement West PO Box 83720 Boise ID 83720-0080		
				208 334-2301 Secretary of State u	se only
Signature //		<u>, </u>	Revision 2/97	·	IT ONLY TO THE E TREASURER'S ACCT
	Nicki Johns	601	bn.pm6		CRETARY OF STATE
Capacity: <u>//////</u>	IER (PARTNER) instruction # 8 on back of fe) 	g/corp/formstabn.pmg	CK: 92 Cu 1 0 20.00	st: 86436#H: 33861 = 28.88
(see	HISTOCON W O ON DRUK OF R	<i>,</i>	Loop to	D7	625