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CERTIFICATE OF ASSUME (Please type or prin	
To the SECRETARY OF STATE, STATE Pursuant to Section 53-504, Idaho gives notice of adoption of an Ass	o Code, the undersigned 🗍 👘 🗄 🗄 🕅
<ol> <li>The assumed business name which the business is:</li> </ol>	the undersigned use(s) in the transaction of
5-Mile Plaza Partnership	
<ol><li>The true name(s) and business addre business under the assumed business</li></ol>	
Name	Complete Address
Gary R. Hawkins	8645 W. Franklin Road, Boise, ID 83709
Gail R. Hawkins	8645 W. Franklin Road, Boise, ID 83709
Elizabeth O. Hawkins	8645 W. Franklin Road, Boise, ID 83709
<ul> <li>3. The general type of business transactor (mark only those that apply)</li> <li>Retail Trade</li> <li>Manufac</li> <li>Wholesale Trade</li> <li>Agricultu</li> <li>Services</li> <li>Construct</li> </ul>	ure X Finance, Insurance, and Real Estate
<ul> <li>4. The name and address to which future correspondence should be addressed: <u>Gary R. Hawkins</u> 8645 W. Franklin Road Boise, ID 83709</li> <li>5. Name and address for this acknowledg COpy is (it other than # 4 above):</li> </ul>	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to: Secretary of State 700 West Jefferson Basement West
Signature: Printed Name: Gary B. Hawkins Capacity: Partner (see instruction # 8 on back of form)	Secretary of State use only IDANO SECRETARY OF STATE 04/06/1999 09:00 UX: 12462 CT: 2618 BH: 204374 1 8 20.80 = 28.88 ASSUM NAME # 2 D24/172

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