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CERTIFICATE OF ASSUMED BUSINESS NAME

Sepretary of State

Business En EESFECTIVE

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

2005 FT 7. 1-1

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

1. The assumed business name which the unbusiness is:	
2. The true name(s) and <u>business</u> address(establishess under the assumed business name Name Robert mills Billick	s) of the entity or individual(s) doing me: Complete Address 5498 W. Grayenge RD. RATHORUM, ID. 83858
3. The general type of business transacted ur Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	nder the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson
5498 W. Grayeage Ro Rathorum ID 83858 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): (208) 691-7320
ignature: Same As Above ignature: Same Bellick (signature required) rinted Name: Robert m Billick apacity/Title: OWNER	Secretary of State use only IDAHO SECRETARY OF STATE 97/29/2905 95:06 CK: 3861 CT: 158010 BH: 623952 1 8 25.00 = 25.00 ASSUM MANE # 2
(see instruction # 8 on back of form)	10111