

Printed Name: /

Capacity/Title: ()(1)

(see instruction # 8 on back of form)

## ASSUMED BUSINESS NAME

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

2005 FEB -2 AM 9: 04

STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersign business is:  \[ \( \text{VVEV} \) \( \text{Vec} \) \( \text{V} \) \[ \text{Vatt} \]	
2. The true name(s) and business address(es) of the business under the assumed business name:  Name  345	entity or individual(s) doing  Complete Address  Reak AUE TOAHO talls ID  83402
3. The general type of business transacted under the  Retail Trade Transportation and Pour Mholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):  Sauce as #4	Phone number (optional): (203) 522-3301
Signature: Ciramis Land	Secretary of State use only

IDAHO SECRETARY OF STATE

@2/02/2005 05:00

CK: 45786568648 CT: 158818 BH: 796669

1 @ 25.00 = 25.00 ASSUM MANE # 2