		CERTIFICATE C	DF
		ASSUMED BUSINES	SS NAME
		Pursuant to Section 53-504 Idaha Code	e, the undersigned
ļ		easing of him g a certificate of Assume	ed Business Name. SECRETARY DE STATE
		Please type or print legibly. NOTE: See instructions on reverse be	STATE OF IDAHO
	1.	. The assumed business name which the ι business is:	undersigned use(s) in the transaction of
		L&I	Xpressions
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:			es) of the entity or individual(s) doing
		Name	
		Lexxie Olney	Complete Address
		Isaac Forsythe	8540 W Canary Ct Garden City, Id 83714
		Cindy Wyatt	8540 W Canary Ct Garden City, Id 83714
			8540 W Canary Ct Garden City, ld 83714
 3. The general type of business transacted under the assumed business name is Retail Trade Transportation and Public Utilities 			inder the assumed business name is:
		Vinclesale Trade Construction Services Agriculture	
			Submit Certificate of
l			Assumed Business
	Λ	Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
	ч .	The name and address to which future	Idaho Secretary of State
		correspondence should be addressed:	450 N 4th Street PO Box 83720
		L & I Xpressions	Boise ID 83720-0080
		8540 W Canary Ct	(208) 334-2301
		Garden City, Id 83714	
5. Name and address for this acknowledgment			
		Copy is (if other than # 4 above):	nt J
			Secretary of State use only
			58
Signature:			
Signature:			
Capacity/Title: Partner 06/06/2008 0F STATE			
Ψđ	hacit		CK: 1000 CT: 158010 BH: 1110423
		(see instruction # 8 on back of form)	5 1 @ 25.00 = 25.00 ASSUM NAME # 2
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