

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2004 NOV 17 AH 9: 22

STATE OF HEAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

✓ Retail Trade ☐ Transportation and Public Utilities ☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate . The name and address to which future correspondence should be addressed: Secretary of St 700 West Jeffe Basement West PO Box 83720 Boise ID 8372 208 334-2301 22 NORTH BRIDGE STREET SAINT ANTHONY, ID 83445 Boise ID 8372 208 334-2301 5. Name and address for this acknowledgment copy is (if other than # 4 above): Phone number TAMARA E PARKINSON 4986 S 2000 W #43 REXBURG, ID 83440 Secretary of St 700 West Jeffe 803440	
TAMARA E PARKINSON The general type of business transacted under the assumed business and Public Utilities Retail Trade Transportation and Public Utilities Wholesale Trade Agriculture Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: TAMARA E PARKINSON 22 NORTH BRIDGE STREET SAINT ANTHONY, ID 83445 5. Name and address for this acknowledgment copy is (if other than # 4 above): TAMARA E PARKINSON 4986 S 2000 W #43 REXBURG, ID 83440	
TAMARA E PARKINSON 4986 S 2000 W #43 REXE The general type of business transacted under the assumed business with the properties of the properties of the part o	
Retail Trade	G, ID 83440
✓ Retail Trade ☐ Transportation and Public Utilities ☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate Secretary of Strate and Address to which future Correspondence should be addressed: Secretary of Strate and Address for the Strate and Stra	BURG, ID 83440
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: TAMARA E PARKINSON 22 NORTH BRIDGE STREET SAINT ANTHONY, ID 83445 5. Name and address for this acknowledgment copy is (if other than # 4 above): TAMARA E PARKINSON 4986 S 2000 W #43 REXBURG, ID 83440	s name is:
correspondence should be addressed: TAMARA E PARKINSON 22 NORTH BRIDGE STREET SAINT ANTHONY, ID 83445 5. Name and address for this acknowledgment copy is (if other than # 4 above): TAMARA E PARKINSON 4986 S 2000 W #43 REXBURG, ID 83440	iness 5.00 fee to:
208 334-2301 SAINT ANTHONY, ID 83445 5. Name and address for this acknowledgment copy is (if other than # 4 above): TAMARA E PARKINSON 4986 S 2000 W #43 REXBURG, ID 83440	st
5. Name and address for this acknowledgment copy is (if other than # 4 above): TAMARA E PARKINSON 4986 S 2000 W #43 REXBURG, ID 83440	
Copy is (if other than # 4 above): TAMARA E PARKINSON 4986 S 2000 W #43 REXBURG. ID 83440	
4986 S 2000 W #43 Secretary 6	r (optional):
REXBURG. ID 83440	
REXBURG, ID 83440	of State use only
(signeture required) TAMARA E PARKINSON	81990 IDAHO SECRETARY OF S 1/17/2004 0