04/27/10 09:39 FAX 2085482730

EAGLE ENTERPRISE

Ø 001

227	
CERTIFICATE O ASSUMED BUSINES Pursuant to Section 53-504, Idaho Code submits for filing a certificate of Assumed Please type or print legibly. NOTE: See instructions on reverse be	S NAME a, the undersigned d Business Name. FILED EFFECTIVE 2010 APR 27 AM IO: 28 SELINE TARY OF STATE
1. The assumed business name which the undersigned use(s) in the transaction of business is: 	
2. The true name(s) and business address(e business under the assumed business na Name <u>Any Robinson</u>	es) of the entity or individual(s) doing ame: Complete Address <u>4521_Criter Broy (Box 3.D) Pockland</u> <u>10 839</u> 71 <u>208-548-9444</u>
 3. The general type of business transacted using 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: Amy Lovonson D.D., Box 31.0 Lockl and Td 93271 5. Name and address for this acknowledgme copy is (frother than #4 above): 	Submit Certificate of Assumed Business Name and \$25.00 fee to: Ideho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
Signature: <u>Pobus</u> (signature required) Printed Name: <u>Arry Poloinson</u> Capacity/Title: <u>Owner</u> (see instruction # 8 on back of form)	Secondary of State upp only IDAHO SECRETARY OF STATE OF 4/27/2010 05:00 CK: 426489 CT: 172899 BH: 1219610 I 8 25.60 ASSUM NAME # 2 D 138775