

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name.

1. The assumed business name which the undersigned uses in the transaction of business is:

2003 AUG 15
Micaela D. Nelson
Bud's

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Micaela D. Nelson Name Complete Address
 123 E. 2 N.
 St. Anthony, ID
 83445

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

Retail Trade Manufacturing Transportation and Public Utilities
 Wholesale Trade Agriculture Finance, Insurance, and Real Estate
 Services Construction Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): (208) 624-0962

Micaela D. Nelson
 123 E. 2 N.
 St. Anthony, ID 83445

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
 700 West Jefferson
 Basement West
 PO Box 83720
 Boise ID 83720-0080
 208 334-2301

Secretary of State use only

Signature: Micaela D. Nelson

Printed Name: Micaela D. Nelson

Capacity: Owner

(see instruction # 8 on back of form)

Revision 2/97

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IDAHO SECRETARY OF STATE
 08/19/2003 05:00
 CK: 7382669187 CT: 158010 BH: 697113
 1 @ 25.00 = 25.00 ASSUM NAME # 2

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