

## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

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

2004 SEP -7 AM 10: 01

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

gr	atponies.com
The true name(s) and business address business under the assumed business     Name     Michelle Johnson	
3. The general type of business transacter	
Retail Trade Transporta Wholesale Trade Construct Services Agricultur Manufacturing Mining Finance, Insurance, and Real Est  4. The name and address to which future correspondence should be addressed:  Michelle Johnson PO Box 134 Rupert, ID 83350	Submit Certificate of Assumed Business
5. Name and address for this acknowledge copy is (if other than #4 above):	ment Phone number (optional):  208 436 7828
	Secretary of State use only
rinted Name:	IDAHO SECRETARY OF STATE  CK: 1810 CT: 158010 BH: 764  1 9 25 08 = 25 80 18 BH: 764