

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.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

WA FEB 27 AM 9: 44

SECRETARY OF STATE

The assumed business name which the under business is:	_
 The true name(s) and <u>business</u> address(es) of business under the assumed business name:	Complete Address 5339 N. Liver Pool Cology W. Trow Bridge (Bojse, Taaho 83714) Jan both address
•	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: <u>aral laugh</u> Printed Name: <u>arol Vaughn</u> Capacity/Title: <u>Suvue</u>	Secretary of State use only Company Compa