

Printed Name: __

Capacity/Title: Own

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

AT AER & DU A EA

FILED EFFECTIVE

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

05 SEP -6 PM 2: 53

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:	
BEIL WASOURY	HIVO TILE
2. The true name(s) and <u>business</u> address(es) of the elements under the assumed business name: Name VERM SELL CAL	ntity or individual(s) doing Complete Address 277 JANGROLLOW ROLLOW RO
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining	Submit Certificate of Assumed Business Name and \$25.00 fee to:
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: VERN BELL LART SAND HOLLO ROLL CALCUELL TO SECOY	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): (208) 455-7622
	Secretary of State use only
ignature: 1/1/2	IDAHN SFERFTARY NE STATE

g.\corp\forms\abn forms\al Revised 04/2003

IDAHO SECRETARY OF STATE 99/06/2005 05:00 CX: 687782 CT: 172899 BH: 910138 1 0 25.00 = 25.00 ASSUM NAME 1 2

091383