Signature: (

Capacity:

Printed Name:

(see instruction #8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME FILED 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 use(s) in the transaction of business is: ALADOIN ( LEANING SPRUICE 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name ROBIN A RT.1 BOX 1059-20 HOMEDAIF ID BRIGHT 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 Phone number (optional): \_\_\_\_ correspondence should be addressed: BT 1 (30x 1059-20 5. Name and address for this acknowledgment CODY 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

IDANO SECRETARY OF STATE

02/09/1999 09:00 CK: CASH CT: 118861 BH: 186419

1 8 28.88 = 28.88 ASSUM NAME # 2

122976