

Printed Name: TEAN

Capacity/Title: PRESIDENT

(see instruction # 8 on back of form)

## 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.

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STATE OF TOAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:	
2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:  Name  Complete Address  ERANK E. KELLEY  5/2E ANTIGUA DE MERIDIAN ID  83(42)	
3. The general type of business transacted under the assumed business name is:  Retail Trade  Transportation and Public Utilities	
<ul> <li>Wholesale Trade</li> <li>Construction</li> <li>Agriculture</li> <li>Manufacturing</li> <li>Mining</li> <li>Finance, Insurance, and Real Estate</li> </ul>	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
4. The name and address to which future correspondence should be addressed:	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):
	Secretary of State use only

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IDANO SECRETARY OF STATE

03/03/2003 05:00

CK: CASH CT: 158010 BH: 666100

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