CERTIFICATE OF ASSUMED BUSINESS NAME

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

1. 0.40 mil2: 29

Please type or print legibly.

NOTE: See instructions on reverse before filing.

NOTE: See instructions on reverse perore in	<u></u>
1. The assumed business name which the understanding it Real	
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name Lynthia Waters	Complete Address S31 Cedar Park Ln hma Id S3686
3. The general type of business transacted unde Retail Trade Transportation ar Wholesale Trade Construction	er the assumed business name is:
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: () ray waters 331 Cedar Park In.	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
Signature: Lynthia Laters Printed Name: Lynthia Naters Capacity/Title: Owner	IDAHO SECRETARY OF STATE 03/10/2005 05:00 CK: 1727 CT: 158810 BH: 797791 1 8 25.60 = 25.60 ASSUM MANE # 2
(see instruction # 8 on back of form)	D 200