

Capacity/Title:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EF

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

04 APR 12 AM 8: 27

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

 The assumed business name which the under business is:	lar services
3. The general type of business transacted under Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: PO BOX 321 Kuna, TD 83634	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
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	Phone number (optional): Secretary of State use only
Signature: (signature required) Printed Name: Sereny V : PV	IDAHO SECRETARY OF STATE 94/12/2004 05:00 CK: 1357 CT: 158010 BH: 738870 1 8 25 80 = 25.80 ASSIM NOME # 2