CERTIFICATE OF ASSUMED (Please type or print leg	BUSINESS NAME FECTIVE
To the SECRETARY OF STATE, STATE OF Pursuant to Section 53-504, Idaho Cogives notice of adoption of an Assumo	ode, the undersigned
1. The assumed business name which the business is: About F	undersigned use(s) in the transaction of
The true name(s) and business address(business under the assumed business na	es) of the entity or individual(s) doing ame is/are:
Jan Name Feller	315 A a Ska
	(ald well, 1D)
3. The general type of business transacted (mark only those that apply)	under the assumed business name is:
☐ Retail Trade ☐ Manufacturi ☐ Wholesale Trade ☐ Agriculture ☐ Services ☐ Construction	Finance, Insurance, and Real Estate
4. The name and address to which future correspondence should be addressed:	Submit Certificate of
Dan Filler	Assumed Business Name and \$20.00 fee to:
315 A 195Ka Gal dwell 5. Name and address for this acknowledgment	Secretary of State 700 West Jefferson
5. Name and address for this acknowledgme copy is (if other than # 4 above):	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
	IDAHO SECRETARY OF STATE
Signature: Ja XIII	64/11/2006 69:00 CK: 5183 CT: 129571 M: 387537
Printed Name:	1 0 28.00 = 28.00 ASSUM HAME 0 2
(see instruction # 8 on back of form)	D 34891