

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.

The assumed business name which the urbusiness is:	Oi
2. The true name(s) and business address(establishess under the assumed business name Name EARL BUYER	
3. The general type of business transacted up Retail Trade	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: **EARL BOYER** **BOYER** **BOYER** **BOYER** **ABOY GAST** **KIMBERLY** **TD 83341**	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgme copy is (if other than # 4 above). 	ent Phone number (optional): (208)423-465/
	Secretary of State use only
Signature: 4. DW/ Signature: EARL BOYER Capacity/Title: 0WER	IDAHO SECRETARY OF STATE 11/02/2004 05:00 CK: 3429 CT: 158010 BH: 774466 1 9 25.00 = 25.00 ASSUM NAME # 2

(see instruction # 8 on back of form)