

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

O7 DEC -3 AM 9: 21 SECRETARY OF STATE STATE OF IDAHO

117268

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The true name(s) and business address business under the assumed business     Name	ss(es) of the entity or individual(s) doing s name:  Complete Address
Wayne Skeen	3315 Addison Ave E.
	Twin Falls, In - 83301
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3. The general type of business transacted  Retail Trade Transport  Wholesale Trade Construct  Services Agricultu  Manufacturing Mining  Finance, Insurance, and Real Es  4. The name and address to which future correspondence should be addressed:  Wayne Skeem  3315 Addison E  Twin Falls, ID 8330	station and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:  Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080  (208) 334-2301
5. Name and address for this acknowled copy is (if other than #4 above):	gment
	Secretary of State use only
Signature: Wayne Skeem  (signature required)	Section   Sect
Printed Name: Weyne Skeem	IDAHO SECRETARY OF STATE  12/03/2007 05:00  CK: 9858932 CT: 158818 RH: 18873
(see instruction # 8 on back of form)	25.00 = 25.00 ASSUM NAME I