

Capacity/Title: ownER

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

3 M 430 AH 1:06

Please type or print legibly. NOTE: See instructions on reverse before filing.

| business under the assumed business nar Name | |
|---|--|
| BRETT MILLER | Complete Address 15 QUAIL RUN, GARDEN VALLEY, 10 8 |
| Retail Trade Transportation Wholesale Trade Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: The name and address to which future correspondence should be addressed: | 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 |
| . Name and address for this acknowledgmer copy is (if other than # 4 above): | |
| | |

IDAHO SECRETARY OF STATE

96/39/2005 95:00

CK: 569 CT: 158010 BH: 818958
1 8 25.00 = 25.00 ASSUM NAME # 2