S

P



CERTIFICATE OF ASSUMED BUSINESS NAME

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. 2004 OCT -8 AM 9: 48

STATE OF IDAHO

1. The assumed business name which the und business is: O'heliegh's	lersigned use(s) in the transaction of
2. The true name(s) and business address(es) business under the assumed business name Name	
3. The general type of business transacted und Retail Trade	der the assumed business name is: and Public Utilities 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 acknowledgment copy is (if other than #4 above):	nt Phone number (optional): 208 - 337 - 6729
Signature: <u>MANN MANN</u> (signature required) Printed Name: Shakon DeVitz	Secretary of State use only Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE 10/08/2004 05 1
Capacity/Title: <u>600 e R</u> (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 10/08/2004 05:0 CK: 6717 CT: 158019 BH: 778

080792