

(see instruction # 8 on back of form)

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.

05 AUG 12 PM 12: 06

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

SECRETARY OF STATE

1. The assumed business name which the undersign business is:	STATE OF IDAHO ned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Dennis T. Guthmiller 248 Jamifer T. Guthmiller (Sume)	Complete Address
3. The general type of business transacted under the Retail Trade Transportation and P Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Dennis / Jennifer Guthmiller 2484 N. Hickory Way Way Ward on TO 33442-8045	· ·
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208- <u>893-5179</u> 808-479-7355 Secretary of State use only
Signature: (signature required) Printed Name: Sum 5 Guthmillen Capacity/Title: Owner	IDANO SECRETARY OF STATE @8/12/2005 @5:00 CK: CASH CT: 158810 BH: 985956 1 @ 25.88 = 25.80 ASSUM WANE # 2

CK: CASH CT: 158010 BH: 905956 @ 25.00 = 25.00 ASSUM WANE # 2 D 90551