	CERTIFICATE OF ASSUM (Please type or print legibly. S	See instructions on reverse.)
	To the SECRETARY OF STATE, STAT Pursuant to Section 53-504, Idal gives notice of adoption of an As	tho Code, the undersigned 👫 🧟 📜 🦈
1.	The assumed business name which the unbusiness is: () topia G:fts	ndersigned use(s) in the transaction of
2.	The true name(s) and business address(es business under the assumed business name Name Scheek S	
		MACKAY Idaho 83251
3.	The general type of business transacted ur (mark only those that apply)	nder the assumed business name is:
	Retail Trade Manufacturing Moderate Agriculture Services Construction	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4.	The name and address to which future correspondence should be addressed:	Phone number (optional): 208-588-2546
	P.O. Box 594	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	MACKAY TJAha 8325/ Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West Jefferson nt Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		Secretary of State use only IDAHO SECRETARY OF STATE
_	ure: Dun / m	IDAHO SECRETARY OF STATE 8 / 02 / 2000
Printed	Name: Debra L. Scheer	1 0 20.00 = 20.00 ASSUM NAME # 2
	ity: <u>OWNER JOPERA + OR</u> (see instruction # 8 on back of form)	90 toublooms