

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.

2006 MAY -5 PM 12: 32

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the undersigned	l use(s) in the transaction of
business is: 1 De's CIVIL CUIL)	
2. The true name(s) and business address(es) of the entity or individual(s) doing	
business under the assumed business name:	Complete Address
Name	7 = Alice BLYFT
- Se MAKT. N2 (3)	7 1 1 83221
	0.00
3. The general type of business transacted under the assumed business name is:	
Transportation and Public Hillities	
Thetail Hade	one office
The state of the s	Submit Certificate of
	Assumed Business
	Name and \$25.00 fee to:
Finance, Insurance, and Real Estate	Secretary of State
4. The name and address to which future	700 West Jefferson
correspondence should be addressed:	Basement West
377 FALCE POLIFY ID	PO Box 83720 Boise ID 83720-0080
83221	208 334-2301
Name and address for this acknowledgment	Phone number (optional):
COPY IS (if other than # 4 above).	589-8817
277 1 No Putch	
DO BAY VOCA	Secretary of State use only
B14 (23test 10 (3)2)	
BIACRTOCT II) 8521	
Signature:	
(signature required)	IDAHO_SECRETARY OF STATE
Printed Name: <u>JACLAO MACA LEZ</u>	05/05/2006 05:00 CK: 43091 CT: 86994 BH: 953266
Capacity/Title:	1 0 25.00 = 25.00 ASSUM NAME # 2