

Capacity/Title: Destinu

(see instruction # 8 by 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.

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



The assumed business name which the undersit business is: Outcast Renta	
	Complete Address NONTANA AVE
3. The general type of business transacted under to Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining	
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Outcast Rentals 7316 N Montana Ive Caldwell, ID 83605	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Phone number (optional):
 Name and address for this acknowledgment copy is (if other than #4 above): 	208-405-1422

IDAHO SECRETARY OF STATE

98/28/2006 95:00

CK: 2733 CT: 203769 BH: 972138
1 0 25:00 = 25:00 ASSUM MANE # 2