

Printed Name: Herian

Capacity/Title: () Une

(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.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

06 FEB 27 PM 2: 04

The assumed business name which the undersigned use(s) in the transaction of business is:	
The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Name Contain Precious	Complete Address
The general type of business transacted under the Retail Trade Transportation and I Wholesale Trade Construction	
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
Seume as above	Secretary of State use only

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IDAHO SECRETARY OF STATE

@2/27/2006 05:00

CK: CASH CT: 158010 BH: 939886
1 0 25.00 = 25.00 ASSUM NAME # 2

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