Capacity:___

CERTIFICATE OF ASSUMED BUSINESS (Please type or print legibly. See instructions on reverse	NAME
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersign gives notice of adoption of an Assumed Business Nam	
1. The assumed business name which the undersigned use business is: American for hoofing	Signification of
2. The true name(s) and business address(es) of the entity or Individual(s) doing business under the assumed business name is/are:	
David Linebarger 2736 E Kg	NUMBER Address #102 Bois
tamilla Linebarger Name	/
3. The general type of business transacted under the assumed business name is: (mark only those that apply) (mark only those that apply)	
	nsportation and Public Utilities ince, Insurance, and Real Estateing
4. The name and address to which future Phone number correspondence should be addressed:	(optional): 381 0106
AT36 F Red Cedar Ln #102	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgment	Secretary of State 700 West Jefferson Basement West
COpy is (if other than # 4 above):	PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only IDAHO SECRETARY OF STATE
- 100 MA & 1000 111	29/08/1997 09 a 00
Signature: 20 Mills 17 Stuebling 12	1 0 20.00 = 26.00 RSSUH NAME
Capacity: Capacity:	D 7885