

## 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.

2012 JAN 26 AM 8: 52

## Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAHO

		SIAIE UH (DAH)	
1.	The assumed business name which the undersign	ned use(s) in the transaction of	
	business is:		
		$-\mathcal{R}$	
	FROM DAYS GON	E Dy	
		<i></i>	
2.	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing		
	business under the assumed business name:		
	. , , Name	Complete Address	
	Michelle L. MANDOLF 12	11 N FULL St	
		NDPOINT ND 83864	
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3.	The general type of business transacted under the assumed business name is:		
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		ubiic Otiities	
	Wholesale Trade Construction		
	Services Agriculture		
	Manufacturing Mining	Submit Certificate of	
		Assumed Business	
	Finance, Insurance, and Real Estate	Name and \$25.00 fee to:	
1	The name and address to which future	0	
7.	correspondence should be addressed:	Secretary of State	
	10 '// MAND	450 North 4th Street PO Box 83720	
	MICHILL MANDOLF	Boise ID 83720-0080	
	122 N FILA St.	208 334-2301	
	SANDROINT ID. 83864	200 004 2001	
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5.	Name and address for this acknowledgment		
	CODY IS (if other than # 4 above).		
		Secretary of State use only	
Signa	ature: Michelle Mandalf		
Printe	ed Name: MIChelle MANDOLF		
Capa	city/Title: <i>DWN&amp;</i> k		
		IDAHO SECRETARY OF STATE	
Signature:		01/26/2012 05:00 CK: 8381 CT: 158810 BH: 1307870	
Printed Name:		1 0 25.00 = 25.00 ASSUM NAME # 2	
Cana	city/Title:	T ~ -	
Jupu		1)152823	