

## CERTIFICATE OF ASSUMED BUSINESS NAMEFILED/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.

(see instruction #8 on back of form)

SECRETARY OF STATE

D66998

1. The assumed business name which the undersign business is:  Southmay Mark!	
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name:  Name  South may O	Complete Address 8944 Bowmont RD Mampa, Foliaho 83686
3. The general type of business transacted under the 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:  SHE SHE SOUNDER RETAILED	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
Signature:  Printed Name: Self-Southman  Capacity/Title:  Owner	IDANO SECRETARY OF STATE  97/10/2003 05:00  CK: CASH CT: 158816 BH: 698364 1 0 25.00 = 25.00 ASSUM NAME 1 2