

Printed Name: WEND

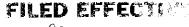
Capacity/Title: SALES

(see instruction # 8 on 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. NOTE: See instructions on reverse before filing.



OS.JUH 28 AM 10: 07
SECRES OF DAHO

THE GRANITE GAL	
2. The true name(s) and <u>business</u> address(es) of the endusiness under the assumed business name: Name Wendy M Shanahan Bois	Complete Address E. MOKENA DR
3. The general type of business transacted under the a □ Retail Trade □ Transportation and Pub □ Wholesale Trade □ Construction □ Services □ Agriculture □ Manufacturing □ Mining □ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: 2659 € MOKCAG DR BOISE □ TO	
5. Name and address for this acknowledgment copy is (if other than # 4 above): Signature: Sig	Phone number (optional): Secretary of State use only

06/28/2006 05:00 CK: 5336 CT: 158810 BH: 962452 1 9 25.00 = 25.00 ASSUM NAME # 2