

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.

07 MAR 22 AM 10: 27

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

NOTE: See Instructions on leverse before minig.	STATE OF IDAHO"
The assumed business name which the undersigned business is: \[\int REASURE VALLEY \flash AIR \]	
2. The true name(s) and <u>business</u> address(es) of the enbusiness under the assumed business name: Name Maria Santa Cruz-Cenvik Bo	Complete Address OPG X Alder Pt. And 188 12. 83714
3. The general type of business transacted under the a	ssumed business name is:
Retail Trade Transportation and Pub Wholesale Trade Construction	
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	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
LOGG N. Alder Pt. Are	PO Box 83720 Boise ID 83720-0080 208 334-2301
Burse, 10. 83714 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
Maria lanta Chuz-Cernik	
6099 N. Alder Pt. Ane	Secretary of State use only
Buise 12. 83714	
ignature (signature required)	TROWN SECRETARY OF STATE
winted Name: Mar la Parts Cruz-Cyrnille	03/22/2007 05:00 CK: 2000 CT: 158018 BH: 1041834
Capacity/Title: <u>Oresident</u>	1 8 25.88 = 25.88 ASSUM NAME # 2
(see instruction # 8 on back of form)	D 109583