

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

108 JUL 21 AM 8: 45

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

The true name(s) and business under the as Name	business address(es) of t sumed business name:	ne entity or individual(s) doing Complete Address
Lames C So	Allow TI BH	6 Box Uo3 Pocate/10 Id
Retail Trade Wholesale Trade Services Manufacturing Finance, Insuran The name and address	☐ Transportation and ☐ Construction ☐ Agriculture ☐ Mining Ce, and Real Estate ☐ to which future	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State
fit 6 Box 403	•	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for copy is (if other than # 4 abov	this acknowledgment	Phone number (optional): (208) 240-8616
		Secretary of State use only

07/21/2008 05:00 CX: 2679 CT: 228821 BH: 1127795 1 R 25.88 = 25.80 ASSUM MANE # 2

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