

CERTIFICATE OF ASSUMED BUSINESS NAMEFILED/EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. (1) [1] Fil 2: 09

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is: Marlin	
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Leslie Churchill	entity or individual(s) doing Complete Address Z87 Lake Shore Dv aldwell ID 83605
3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction	
Services	Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West
Jacob MHChell 16287 Lake Shore dr Caldwell. 1D 83605	PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above). 	Phone number (optional): 989-0892
	Secretary of State use only
apu. pgg	063612

Signature:

Printed Name: ACOB MITCHELL

CWNER

Capacity/Title:_

(see instruction # 8 on back of form)

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IDAHO SECRETARY OF STATE

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CK: CASH CT: 158010 BH: 669339

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