

CERTIFICATE OF ASSUMED BUSINESS NAME

	Film
CERTIFICA ASSUMED BUS Pursuant to Section 53-504, ke submits for filing a certificate of Please type or prin NOTE: See instructions on re-	SINESS NAME daho Code, the undersigned of Assumed Business Name.
business is:	nich the undersigned use(s) in the transaction of
2. The true name(s) and business a business under the assumed business. Name **The true name(s) and business a business and the assumed business are a sum of the assumed busi	Address(es) of the entity or individual(s) doing siness name: Complete Address 1409 w. WALLER CR Rd. McCammod Th. 83250
Retail Trade Trade Co Wholesale Trade Co Services Ag Manufacturing Min Finance, Insurance, and R 4. The name and address to which correspondence should be address ACFR LANDSCARE MA MARKER CE R	future essed: OUNDEMIES T Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: (signature required) Printed Name: Capacity/Title: (see instruction # 8 on back of form)	Secretary of State use only Secretary of State use only IDANO SECRETARY OF STATE

01/06/2003 05:00 CK: 1300 CT: 150010 BH: 654751 1 8 20.00 = 20.00 ASSUM NAME # 2

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