

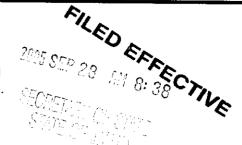
## CERTIFICATE OF ASSUMED BUSINESS NAME

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.

(see instruction # 8 on back of form)



D92138

The assumed business name which the undersigned use(s) in the transaction of business is:  ———————————————————————————————————		
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:		
<u>Name</u>		Complete Address
Elizabeth Navock-White	1803	S.Juniper 190
		pa Jagho
	<u>830</u>	96
3. The general type of business transacted under the assumed business name is:		
Retail Trade Transportation and Public Utilities  Wholesale Trade Construction		
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate		Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
The name and address to which future correspondence should be addressed:		Secretary of State 700 West Jefferson Basement West
1803 S Juniper 190		PO Box 83720
Sampa, Tdaho		Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen	nt	Phone number (optional):
CODY is (if other than # 4 above):		(20%) 840-4429
1803 S TUNIOR 190		Secretary of State use only
Vampa 17 b 83686	ξ,	Joseph Or Guite List offing
Signature: (signature required)	orpiforms\abn forms\abn.p65 Revised 04/2003	
Printed Name: Elizabeth Navock-White	forms\abn forms\ Revised 04/2003	IDAHO SECRETARY OF STATE 09/28/2005 05:00 CK: 2029 CT: 158010 BH: 913989
Capacity/Title: (\)\\\\\\()\\\()	orp\for Re	1 0 25.00 = 25.00 ASSUM NAME # 2