## **CERTIFICATE OF** ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

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2005 MAR -3 PM 2: 12

STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

	. o. o mmrg.
1. The assumed business name which the u business is:  ———————————————————————————————————	
2. The true name(s) and business address(e business under the assumed business name  Name  Robert W Straley	of the entity and the second
<ul> <li>Wholesale Trade</li></ul>	Submit Certificate of
Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  RODERT WSTGLEY  439 Marion Stapt A  Sand Doint Td. 83864	Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgmer copy is (if other than # 4 above).</li> </ol>	nt Phone number (optional):  203-210-5179
	Secretary of State use only
Printed Name: Nobert WS+ Gicy Capacity/Title: OWNEY (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  ### PAGE

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