Capacity/Title: OWN ER

(see instruction # 8 on back of form)

CERTIFICATE OF FILED EFFECTIVE 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.

99353

HOME Q	UILTERS
The true name(s) and business address business under the assumed business.	name:
Name	Complete Address
LAURA EARL	144 BW 100 S
	RUPERT, ID 83350
	ed under the assumed business name is:
Retail Trade Transport Wholesale Trade Construct	tation and Public Utilities
Services Agricultu Manufacturing Mining Finance, Insurance, and Real Es	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Laura Earl	700 West Jefferson Basement West
	PO Box 83720 Boise ID 83720-0080
144 BW 100 S	208 334-2301
Rupert, ID 83350 5. Name and address for this acknowled copy is (if other than # 4 above):	Igment Phone number (optional):
	Secretary of State use only