

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

07 SEP -4 AM 8: 37

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Sue Mius 106 J. Main Pocaterio, IDE	<u>33</u> 204-
3. The general type of business transacted under the assumed business name is: Retail Trade	
4. The name and address to which future correspondence should be addressed: SAFARI GRAPHICS, IUC TOS U. MAIN POCATEUR ID 83204 Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
5. Name and address for this acknowledgment copy is (if other than # 4 above): Phone number (optional): 200-234-4405	
Secretary of State use only	
Signature: Dusan Mulls Printed Name: Susan Mills Capacity/Title: PRISIDEM Software required: Capacity/Title: PRISIDEM Software required: Capacity/Title: 25.88 = 25.88 ASSUM NO.	: 88