Printed Name:

(see instruction # 8 on back of form)

Capacity:

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) Pursuant to Section 53-504, Idaho Code, the undersigned 25 PM 1:29 To the SECRETARY OF STATE, STATE OF IDAHO gives notice of adoption of an Assumed Business NameRETARY OF STATE 1. The assumed business name which the undersigned use(s) in the transaction business is: 05 -n-TOES 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Addres <u>Mame</u> 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing Retail Trade Finance, Insurance, and Real Estate Agriculture Wholesale Trade Construction Mining Services 4. The name and address to which future Phone number (optional): ____ correspondence should be addressed: Debbie Green Submit Certificate of Assumed Business 3500 W State St Name and \$20.00 fee to: Boise ID 83703 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** PO Box 83720 CODY IS (if other than # 4 above): Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 02/25/1998 09:00 CK: 1148 CT: 94783 DH: 85262 Signature: 1 @ 29.00 = 20.00 ASSUM MAME

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