

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.

2005 MAY -2 AM 9: 13

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

STATE OF WAHO

D87304

1. The assumed business name which the under business is:	
2. The true name(s) and <u>business</u> address(es) or business under the assumed business name: Name Sear Peoley	f the entity or individual(s) doing Complete Address 1605 P: ne Street Post Falls FD 83854
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining	d Public Utilities Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Sean Pooley 1605 Dine Street Dost Falls ID 83854	Name and \$25.00 fee to: 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): (ょ0名) しいころちゃく
	Secretary of State use only
Signature: (signature required) Printed Name: Som Pooley Capacity/Title: Owner	IDAHO SECRETARY OF STATE 95/02/2005 95:00 CK: 46335165162 CT: 158010 BH: 807769 1 0 25.00 = 25.00 ASSUM NAME # 2