

CERTIFICATE OF **ASSUMED BUSINESS NAME**

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 2006 MAR -6 Pril 9: 140

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

SECRETARY OF THE STATE OF THE S

G & K	K Vending
2. The true name(s) and business address(est business under the assumed business name Name Kathy Fuller Gary Fuller	es) of the entity or individual(s) doing me: Complete Address 103 3rd Street, Wallace, ID 83873 103 3rd Street, Wallace, ID 83873
The general type of business transacted us Retail Trade Transportation	under the assumed business name is:
Wholesale Trade	Submit Certificate of Assumed Business
5. Name and address for this acknowledgme copy is (if other than # 4 above):	nent Phone number (optional): 208-752-5231
	Secretary of State use only
nature: <u>Hary Fuller</u> (signature required) nted Name: Gary Fuller & Kathy Fuller	Secretary of State
(see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE