

Signature: X

Printed Name: Robert

Capacity/Title: () いんと

(see instruction # 8 on back of form)

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.

06 FEB 17 PM 12: 01

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

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the undersigned business is:	. ,
2.	business under the assumed business name: Robert Mcusker 3	entity or individual(s) doing Complete Address Complete Address Constant of F31 Cisc Ib & 3716
3.	The general type of business transacted under the Retail Trade Transportation and Put Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4.	The name and address to which future correspondence should be addressed: Robert McCus Ken 3900 E. Amity #31 Boise IL & 3716	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): 205 921-0879
		Secretary of State use only

corp/forms\abn forms\abn Revised 04/2003

IDANO SECRETARY OF STATE 92/17/2006 05:00 CK: 2066 CT: 150010 BH: 930477 1 0 25:00 = 25:00 ASSUM NAME # 2

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