<u> 227</u>



CERTIFICATE OF ASSUMED BUSINESS NAME

08 MAR -6 AM 9: 01

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: ELLE EAGLE	
2. The true name(s) and business address(es) of business under the assumed business name: Name Alfred E. Sichlinger	Complete Address 6175 S. Albion Rd. Harrison, Id. 83833
 3. The general type of business transacted under the last of the las	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
Printed Name: ALFRED SICULINGER Capacity/Title: OWNER (see instruction # 8 on back of form)	Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE 23/26/2029 25=20 CK: 3536 CT: 158010 BH: 1103060 1 9 25.86 = 25.86 ASSUM MANE #

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