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CERTIFICATE OF ASSUMED EUSED/ESFECTEVE (Please type or print legibly. See instructions on reveale.)	
To the SECRETARY OF STATE, STATE OF IDAHO	
 The assumed business name which the undersigned use(s) in the transaction of business is: <i>工furburu Transport</i> 	
The true name(s) and business address(business under the assumed business na	es) of the entity or individual(s) doing
 The general type of business transacted under the assumed business name is: (mark only those that apply) 	
Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining	
 The name and address to which future correspondence should be addressed: 	Phone number (optional) (208) 853-2928
JOSE M- I FURBURU 7195 Bluebird DR. Boise, Id. 83703	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgen copy is (if other than # 4 above):	ent Basement West PO Box 83720
SAME	Boise ID 83720-0080 208 334-2301
	Ø3/28/2000 Ø9:00 CK: 7122 CT: 128861 BH: 383867 1 28.80 = 20.80 ASSUM HARE # 2
Signature: See Transcrive	1 0 20.00 = 20.00 ASSUM NAME # 2
Printed Name: Jose NI. Iturburu	D34417
Capacity: <u>OCOVER</u> (see instruction # 8 on back of form)	D34417
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