Signature:

Capacity/Title:

Printed Name: Alex

Owner

(see instruction # 8 on back of form)

## **CERTIFICATE OF**

FILED EFFECTIVE

ASSUMED BUSINESS NAME 2006 JAN 31 AM 11: 33

Pursuant to Section 53-504, Idaho Code, the undersigned SECHE TAIL WARD submits for filing a certificate of Assumed Business Name.

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

The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:	
Aleksandr Kotsyuba	82 W Chrisfield Dr
he general type of business transacted under the	ne assumed business name is:
Retail Trade Transportation and	Public Utilities
Wholesale Trade	Cubarit Cartificate of
	Submit Certificate of Assumed Business
	Name and \$25.00 fee to:
Finance, Insurance, and Real Estate	1
ne name and address to which future	Secretary of State 700 West Jefferson
orrespondence should be addressed:	Basement West
Alex Kotsyuba	PO Box 83720
32 W Chrisfield Dr	Boise ID 83720-0080
Meridian, ID, 83642	208 334-2301
	Phone number (optional):
Name and address for this acknowledgment copy is (if other than #4 above).	208-794-9919
THE PARTY OF A PROPERTY OF A MANAGEMENT	200-104-9919
CODY IS III OTHER HIGH #4 GDOSE).	

IDAHO SECRETARY OF STATE U1/31/2006 05:00 CK: 716849 CT: 172099 BH: 935220 1 8 25.00 = 25.00 ASSUM NAME # 2