

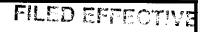
CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)



SECRETARIO PM 3: 47
SECRETARIO OF STATE
STATE OF IDAHO

 The assumed business name which th business is: 	ne undersigned use(s) in the transaction of
MC ENTERPRISE	A RED WALJON SERVICES
The true name(s) and <u>business</u> address business under the assumed business <u>Name</u>	ss(es) of the entity or individual(s) doing
3. The general type of business transacted Retail Trade Transport Wholesale Trade Construct Services Agricultu Manufacturing Mining Finance, Insurance, and Real Es	station and Public Utilities etion Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: **THEN COOK** 32 N MIDLAND BLVD NAMER 10 636.5	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowled copy is (if other than # 4 above). 	dgment Phone number (optional): 208 697-3083
	Secretary of State use only
Printed Name: MATHEWS COOK	IDAHO SECRETARY OF STATE O5/11/2006 05:00 CK: CASH CT: 158010 RH: 954108 1 8 25.00 = 25.00 ASSUM NAME #