Capacity/Title \_

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 JUL 30 AM 8: 31

SECRETARY OF STATE STATE OF IDAHO

D123685

Please type or print legibly.

NOTE: See instructions on reverse before filing.

<ol><li>The true name(s) and business address(es) of business under the assumed business name:</li></ol>	the entity or individual(s) doing
Name	Complete Address
Scott W. Bodlander	1163 E MILES AUE
	Hayden ID B3835
The general type of business transacted under      Retail Trade      Transportation and	
<ul> <li>Wholesale Trade</li></ul>	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed:  Scott W. Bodlander  1163 E. MILES AVE  Hayden ID B3835	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgment copy is (if other than # 4 above).</li> </ol>	Phone number (optional): (208) (640-9799
	Secretary of State use only