

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name \$205 SEP 12 All 8:51

Please type or print legibly.

NOTE: See instructions on reverse before filing. | OCCUPATION OF STATE

MOTE. See histiactions of reverse belone	OFFICE AND OF SHEET
The assumed business name which the under business is:	STATE OF 100040 ersigned use(s) in the transaction of
The true name(s) and business address(es) business under the assumed business name	
Name	Complete Address
Kami Severin	526 W 200N
Kami Amrein	Blackfoot, ID
	83221
3. The general type of business transacted und	ler the assumed business name is:
	and Public Utilities
Wholesale Trade Construction	
Services	Submit Certificate of
ManufacturingMiningFinance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
- Kami Severin	PO Box 83720
576 W 200N	Boise ID 83720-0080 208 334-2301
Blackfoot, ID 83221	200 00 1 2001
5. Name and address for this acknowledgmen	nt Phone number (optional):
COPY is (if other than # 4 above):	208-785-7207
	Secretary of State use only
	99
Signature: Swam	3 3
Printed Name: Kowi Sevecin	Bicorpiloms and incorpiloms an
Capacity/Title: Owner	Read
(see instruction #8 on back of form)	03/15/5007 07:00
	CK: 3489 CT: 158610 BH: 910880 1 @ 25.00 = 25.00 ASSUM NAME # 2

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