CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHOFILED/EFFECTIVE
Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name 21 AM 9: 12

	gives notice of adoption of an	n Assumed Business Name!!! 21 Hit 3.12
1.	The assumed business name which the business is:	undersigned use(s) in she transaction of TE STATE OF IDAHO
	Duperior W	Delding
_	· · · · · · · · · · · · · · · · · · ·)
2.	The true name(s) and business address(business under the assumed business name	
	<u>Name</u>	Complete Address
	Charles W-Kevan	Stel Jackson Ave Emmet I
	Morgaret H. Kevan	11 11 11 11 83617
3.	The general type of business transacted (mark only those that apply)	d under the assumed business name is:
	 □ Retail Trade □ Wholesale Trade □ Services □ Construction 	Finance, Insurance, and Real Estate
4.	The name and address to which future correspondence should be addressed:	Phone number (optional): 202-365-1199
	Oley Kevan 801 Jackson Ave	Submit Certificate of Assumed Business
	Emmet ID 83617	Name and \$20.00 fee to:
	IMMET 1 03011	Secretary of State 700 West Jefferson
5.	Name and address for this acknowledgm	nent Basement West
	COPY IS (if other than # 4 above):	PO Box 83720
		Boise ID 83720-0080 208 334-2301
		Secretary of State use only
	Maril 101	IDAHO SECRETARY OF STATE
Signatu	ure: (Mey Keven f Church WK	CK: 992974721 CT: 86884 BH: 484868
rinted	Name: Charles W. Kevan	1 8 20.00 = 20.00 ASSUM NAME # 2
Capacity: name of the second o		
	(see instruction # 8 on back of form)	Section = 20.00 ASSUM NAME # 2
		1/17/4