

Capacity/Title:

(see instruction # 8 on back of form)

## **CERTIFICATE OF** ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned FEB 28 For filing a certificate of Assumed Business Name. 8 9 56

FILED EFFECTIVE

STATE OF WARIN

NOTE: See instructions on reverse before filing.

Hummer Glass	
The true name(s) and business address(es) of the business under the assumed business name:	e entity or individual(s) doing
Name	Complete Address
Kim R. Mann	1499 Tourmaline
Craig A. Mann	1499 Tourmaline
The general type of business transacted under th  Retail Trade Transportation and F Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:  Hummer Glass  1499 Tourmaline	
Meridian, ID 83642	
Name and address for this acknowledgment	Phone number (optional):
CODY IS (if other than # 4 above).	850-2423
COPY TO (in other trial) # 4 above):	
SOPY TO (II other trial of 4 above).	
	Secretary of State use only
	Secretary of State use only
ature: (signature required)	Secretary of State use only

IDAHO SECRETARY OF STATE
@2/28/2005 05:00
CK: 7730 CT: 158010 BH: 795510
1 0 25.00 = 25.00 ASSUM NAME # 2