

CERTIFICATE OF ASSUMED BUSINESS NAME

10 APR 28 AM 8: 24

FILED EFFECTIVE

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: LOCAL DISH	
2. The true name(s) and business address(es) business under the assumed business name Name Name Vames C. Reed Leslee S. Reed	, , , <u> </u>
3. The general type of business transacted und Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
	Secretary of State use only
Signature: (signature required) Printed Name: JAMES REED	SOUTH SECRETARY OF STATE
(see instruction # 6 on back of form)	IDAHO SECRETARY OF STATE 94/28/2819 95:99