

CERTIFICATE OF Pursuant to Section 53-504, Idaho Code, the undersigned FILED EFFECTIVE submits for filing a certificate of Assumed Business Name. Please type or print legible [F: Sec in 1]

06 FEB 16 AM 11: 11

NOTE: See instructions on reverse before filing.

SECRETAL OF STATE STATE OF IDAHO

The assumed business name which the under business is: OldScript.com	ersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Birgit McCracken	of the entity or individual(s) doing : <u>Complete Address</u> 5735 S. Snapdragon PC. Boise, Idaho 837/6
Wholesale Trade Construction	er the assumed business name is: and Public Utilities
Services	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Birgit McCracken 5735 S. Suppdragon PL. Boise, ID 837/6	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgmen copy is (if other than # 4 above). 	Phone number (optional):
	Secretary of State use only
Signature: Bigit Maracken Printed Name: Bigit Maracken Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE O2/16/2006 05:00