

CERTIFICATE OF

FILED EFFECTIVE

ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned 105 NOV 14

Submits for filing a certificate of Assumed Business Name.

Please type or print legibly. NOTE: See instructions on reverse before filing.



business is: Warranty Outsourcing		
The true name(s) and business address(es) of business under the assumed business name Name Stephanie L Buchanan		tity or individual(s) doing Complete Address W Snohomish St. Boise, ID 83709
3. The general type of business transacted und Retail Trade Transportation a Wholesale Trade Construction		
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Stephanie L Buchanan		Submit Certificate of Assumed Business Name and \$25.00 fee to:
		Secretary of State 700 West Jefferson Basement West PO Box 83720
7278 W Snohomish St Boise, ID 83709		Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above). 	nt	Phone number (optional): 208-562-0699
		Secretary of State use only
Signature:	g voorpiformstebn formstebn p65 Revreed 04/2003	IDANO SECRETARY OF STATE 11/15/2005 05:00 CK: 315 CT: 158810 BH: 922150 1 B 25.00 = 25.00 ASSUM NAME:

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