## CERTIFICATE OF ASSUMED BUSINESS NAME

	CLIVIII ICATE OF ASSOCIATED BUSINESS NAME
	the SECRETARY OF STATE, STATE OF IDAHO
To	the SECRETARY OF STATE, STATE OF IDAHO ** 40 171 ** 197
	Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of
ad	option of an Assumed Business Name.
1.	The assumed business name which the undersigned use(s) in the transaction of
	business is:
	Raro Rago
	ð
2.	The true name(s) and business address(es) of the entity or individual(s) doing
	business under the assumed business name is/are:

	Alason Hill	4007 Nottingham Ln (d'A ID
3.	The general type of business transacted	l under the assumed business name is:
	Whole Sale Trade See calegories on the reverse	
4.	The name and address to which corresp	oondence should be addressed:
	4007 Nothingham Ln	Cd'A, ID 83814
	Signed By	Glason Hell 4-6-9

**Submit Certificate of Assumed** Business Name and \$20.00 fee to:

Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080 Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE DATE 04/10/1997 0900 81556 CK 4: 3517 CUST# 79623

ASSUM NAME = 10 20.00= 20.00

Capacity Owner