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CERTIFICATE OF	FILED EFFECTIVE
ASSUMED BUSINESS	
Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed B	ne undersigned SECRE DATA DE OTAT
Please type or print legibly.	STATE OF IDAHO
NOTE: See instructions on reverse before filing.	
 The assumed business name which the undersigned use(s) in the transaction of business is: 	
GOLM Ente	erprises
	of the entity or individual(s) doing e: Complete Address <u>1096 E 1000S ALbion TI. 8331</u> 1096 E 1000S ALbion Th. 83311
 3. The general type of business transacted und Retail Trade Wholesale Trade Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: <u>GOLM Ewfer Prises</u> <u>1096F</u> <u>10005</u> <u>10055</u> <u>1096F</u> <u>10055</u> <u>1096F</u> <u>10055</u> <u>1096F</u> <u>10055</u> <u>1096F</u> <u>10055</u> <u>1096F</u> <u>10055</u> <u>100555</u> <u>10055555555555555555555555555555555555</u>	and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: <u>Signature reported</u> (signature reported) Printed Name: <u>Linda M. Leack</u> Capacity/Title: <u>Owner</u> (see instruction # 8 on back of form)	Secretary of State use only DIVG35 $DIVG35$