	CERTIFICATE OF ASSUI	MED BUS	SINESS NAME
	To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned of orgives notice of adoption of an Assumed Business Name.		
1.	The assumed business name which the unbusiness is: FRANNIE D'S	ndersigned us	e(s) in the transaction of
2.	2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	FRANCINE KAY DINNAUER	Con 2715 Mant	nplete Address UNS PS Sacle IV 8386
•	THOMAS JOHN DINNAUER &	715 MANT	INS FO SALE TO 8.3860
3.	The general type of business transacted ur (mark only those that apply)	nder the assur	med business name is:
	Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	-	nsportation and Public Utilities ance, Insurance, and Real Estate ing
4.	The name and address to which future P correspondence should be addressed: ZHOMAS J GR FRANCINE C	hone number	(optional):(2 <u>68) 243-959</u> 0
	2715 Marins Bo		Submit Certificate of Assumed Business Name and \$20.00 fee to:
	Sacle <u>II</u> 83860 Name and address for this acknowledgment copy is (if other than # 4 above):		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		88.	SACTION OF STATE HIS ONLY
Signature: Thomas T Divinaven			ビングタイとのの1 の9まのの X: 2235 CT: 145943 BH: 395118
Driete d No. 20 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -			1 र ८४,०० ° ८७,७० भञ्जाता त्रवाद व ८
Capacity: Fant NER (see instruction # 8 on back of form)		complionmatien p65	D 45075
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