

PILED EFFECT **CERTIFICATE OF** ASSUMED BUSINESS NAME NOV 17 PM 2:08

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name SECRETARY OF STATE

Please type or print legibly. NOTE: See instructions on reverse befor	re filing. STATE OF IDAHO
The assumed business name which the und business is:	ersigned use(s) in the transaction of
2. The true name(s) and business address(es) business under the assumed business name Name Bradley Bowlen	Of the entity or individual(s) doing
3. The general type of business transacted und Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	ler the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: POBOX 127 NOS W Frontage PO N Serome That 83338	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above): 	t Phone number (optional):
	Secretary of State use only
Signature: Signature required) Printed Name: Level Lowler Capacity/Title: Co Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 11/17/2005 05:00 CK: 1448 CT: 158010 BH: 922713 1 @ 25.00 = 25.00 ASSUM NAME # 2

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