

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

3004 NOV 10 AM 8: 32

STAFF DE WAHTIN

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The true name(s) and business address(es) of the	entity or individual(s) doing
business under the assumed business name: Name Physical Dames Bugene Olekey 126 mailing: PO Mcd	
The general type of business transacted under the Retail Trade Transportation and Pu Wholesale Trade* Construction	:
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: James Olexen PO Box 27/ McCammon ID 83250	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 307-389-3867
Sept val	Secretary of State use only

Signature: Signature required)

Printed Name: Same Slexey

Capacity/Title: Sunes

(see instruction #8 on back of form)

IDANO SECRETARY OF STATE
11/10/2004 05:00
CK: 939 CT: 158010 BH: 775806
10 25.00 = 25.00 ASSUM NAME # 2

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