

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

2005 JUN 12 AM 9:56

SECRETARY OF STATE STATE OF IDAHO

	SORVICE
2. The true name(s) and business address(es business under the assumed business name	
Name	Complete Address
DOMALO POUND	4785 E COMICH OR.
	TOAKO FAUS, 20 83406
3. The general type of business transacted un	nder the assumed business name is:
	n and Public Utilities
 Wholesale Trade ☐ Construction X 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:	Secretary of State 700 West Jefferson Basement West
DOUALD POLLUD 4785 E COMISH DR	PO Box 83720 Boise ID 83720-0080 208 334-2301
IDANO FALLS, DD 83406	
5. Name and address for this acknowledgme	ent Phone number (optional):
COPY IS (if other than # 4 above).	208-254-0240
	Secretary of State use only
nature: Que Solo Q	1)/() 7 7 7 7 150000 05 = CX: 3317 CT: 150010 BH: 95
(signature required)	# 8
	IDANO SECRETARY OF STATE