

Printed Name: I

Capacity/Title:_

e: Cumer
(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

07 SEP -4 AM 9: 05

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.
NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: emories 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address iki Buchnolz 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Name and \$25.00 fee to: Finance, Insurance, and Real Estate Idaho Secretary of State 4. The name and address to which future 450 N 4th Street correspondence should be addressed: PO Box 83720 Boise ID 83720-0080 (208) 334-2301 5. Name and address for this acknowledgment CODY is (if other than # 4 above): Secretary of State use only

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IDAHO SECRETARY OF STATE
09/04/2007 05 # 00
CK: 427 CT: 158816 BH: 1873748
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