

## 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 101 JUN 22 - AN 8: 47

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

2. The true name(s) and business address(e business under the assumed business name  Name  Sam Castro  The general type of business transacted as	es) of the entity or individual(s) doing me: Complete Address 1434 Colorado Avenue, Idaho Falls ID 83402
3. The general type of business transacted up	
o. The general type of business transacted th	nder the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed:      SAME	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):  SAME	ent Phone number (optional):  208-200-4600
	Secretary of State use only
nature: 6	Perfections at the part of the
nted Name: Sam Castro	Tendend D4/2003

IDAHO SECRETARY OF STATE 96/22/2007 05:00 CK: 14765 CT: 71989 BH: 1861749 1 8 25.88 = 25.88 ASSUM MAME # 2