

## CERTIFICATE OF ASSUMED BUSINESS NAME:

FILED EFFECTIVE

D 90178

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.

1. The assumed business name which the undersigned business is:	use(s) in the transaction of
2. The true name(s) and business address(es) of the er business under the assumed business name:  Name  **Detty G. W. Army Too Kay	ntity or individual(s) doing  Complete Address  Box 69 A  nich, Idaho 83536
3. The general type of business transacted under the as Retail Trade	
Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):  (208-938-0068)
Signature: Signature: Signature fequired Printed Name: Betty G. (Livranta)  Capacity/Title: (see instruction # 8 on back of form)	IDANO SECRETARY OF STATE  07/29/2005 05:00  CX: 4614 CT: 158819 BH: 823958 1 8 25.88 = 25.88 ASSUM NAME # 7