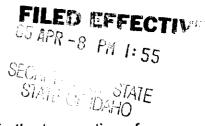


CERTIFICATE OF ASSUMED BUSINESS NAME

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.



business		dersigned use(s) in the transaction of
business	name(s) and <u>business</u> address(es under the assumed business nam <u>Name</u> on Framilliams TII	of the entity or individual(s) doing ne: Complete Address 6149 E Gateway († Boise, ID 83716
☐ Ret ☐ Wh ☑ Ser ☐ Mar	• •	nder the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: 6149 E. Gateway Ct. Boise, ID 83716		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above): 		Phone number (optional): 208-383-9613
	1 1	Secretary of State use only

Signature: But fred William III

Printed Name: Burton Fred Williams III

Capacity/Title: OWNER/OPERATOR

(see instruction # 8 on back of form)

corpiornstabn formstabr Revised 04/2003

IDAHO SECRETARY OF STATE

24/28/29/25 25:20

CK: 589896 CT: 172899 BH: 883586
1 8 25.88 = 25.88 ASSUM NAME # 2

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