

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2006 OCT 30 PH 12: 55

submits for filing a certificate of As	ssumed Business Name.
Please type or print le	gibly. SEOREMEN OF STAIN
NOTE: See instructions on rever	se before filing.
1. The assumed business name which the undersigned use(s) in the transaction of business is:	
business under the assumed busine Name	Complete Address
John Plato	1445 Gastridge Dr. Pocatello, 1D 83201
Stefanie Plato	1445 andridge Dr. Pocatello, 1D 83201
Retail Trade Wholesale Trade Constr Services Agricu Manufacturing Mining Finance, Insurance, and Real 4. The name and address to which futu correspondence should be addressed John Stefanie Plato 1445 Eastridge Dr. Pocatello, ID 83201	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowl	•
COpy is (if other than #4 above):	208-760-0447
	Secretary of State use only
Signature: John Braile (signature required)	Septiment of State 10/30/2006 05:00 00/2006 05:00 00/2006 00/2
Printed Name: John Brandon Plat	Under the second of the second
Capacity/Title: Owner/operator	10/30/2006 05:00 CK: 574329667 CT: 158018 BH: 99449

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(see instruction # 8 on back of form)

CX: 574329667 CT: 158010 BH: 994493 1 0 25.00 = 25.00 ASSUM NAME # 2