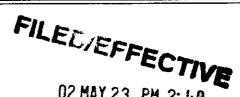


## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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.



02 MAY 23 PM 2: 40

STATE OF IDAHO

1. The assumed business name which the unde business is:	
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name:  Name  A. Rence Gogo	f the entity or individual(s) doing  Complete Address  1426 N Tina Marie  Meridian Td 83642
3. The general type of business transacted under Retail Trade Transportation a  Wholesale Trade Construction	er the assumed business name is:
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	Phone number (optional):
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE  95/23/2002 95 = 00  CK: CASH CT: 158810 BH: 467566  1 0 20.00 = 20.00 ASSUM MANE # 2