

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.

03 MAY 29 PM 12: 18

Please type or print legibly. NOTE: See instructions on reverse before filing. SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the undersign business is: Too CROUS	ned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Tania Dull 6 Naclia Loeschke Bu	e entity or individual(s) doing Complete Address 21 14th Ave N. N., ID 83316 9 EUCLIC 5+ MT Clemens, 148043
3. The general type of business transacted under the Retail Trade Transportation and F Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: TOO COUSTANIA DULLI 631 14th Hie N. Bull FD	e assumed business name is:
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 205 543-2746 Secretary of State use only
Signature: (signature required) Printed Name: A Capacity/Title: (see instruction # 8 on back of form)	IBANO SECRETARY OF STATE 05/29/2003 05:00 CX: 2154 CT: 158810 BH: 683117 1 0 25.00 = 25.00 ASSUM MANE 1 2