

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.

STATE OF IDAHO

I-90 Sisters	
The true name(s) and <u>business</u> address(e business under the assumed business na <u>Name</u>	ame; Complete Address
Joanne Moring	17945 S. Raccoon Ct., Coewd Alex 1011 M. 38th St., Seattle, WA9
The general type of business transacted u	inder the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: I-90 Sisters 17945 S. Raccoon Ct.,	Submit Certificate of Assumed Business
Coeur d'Alene, ID. 83814	· 医克里克氏试验检尿病 医克里克氏 医皮肤
	ent Phone number (optional); 2.08 - 765 - 9200

ന്നിന്നെടിയാന forms Aewsed 04/2003

Printed Name: Carol Muzik

(see instruction # 8 on back of form)

Capacity/Fitle: Partner

IDAHO SECRETARY OF STATE

OB/11/2004 O5:00

CK: 4395 CT: 158819 BH: 768248

E 25.88 = 25.88 ASSUM NAME # 2

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