

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name

2007 APR 30 AM 10: 41

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

The assumed husiness name which the un	STATE OF IDAHO
1. The assumed business name which the undersigned use(s) in the transaction of business is:	
The true name(s) and business address(es business under the assumed business name	
Name	Complete Address
Christine Kincaid	415 45 5t. 10 Box 293 Hazerton, ID 83335
Lyle Bulbck	366A E. 350N. Serome, ED83338
The general type of business transacted ur	nder the assumed business name is:
Retail Trade Transportation	n and Public Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business Name and \$25.00 fee to:
Finance, Insurance, and Real Estate	Name and \$25.00 fee to.
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
Kincaid's Ltd.	PO Box 83720
PO BOX 293	Boise ID 83720-0080 208 334-2301
Hazelton, ID 83335	200 004-2001
Name and address for this acknowledgment copy is (if other than # 4 above).	ent Phone number (optional):
	205-529-4005
	Secretary of State use only
	59d
gnature (1)	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
(Signature required)	IDAHO SECRETARY OF STATE Solid
inted Name: Christine Kinaid	IDAHO SECRETARY OF STATE 45/01/2007 05:00
apacity/Title: OWNEC	CK: 968717472 CT: 212826 BH: 18

1211034