

CERTIFICATE OF ASSUMED BUSINESS NAME

The state of the s

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2006 MAY 11 AH 8: 48

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:			
			Name
		00 S. Kansas Ave. Fruitland, ID 83619 00 S. Kansas Ave. Fruitland, ID 83619	
The general type of business transacted u			
Retail Trade Transportation		lic Utilities	
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future		Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson	
correspondence should be addressed: Dave Clements		Basement West PO Box 83720	
700 Three Rivers Way		Boise ID 83720-0080	
Fruitland, ID 83619	·	208 334-2301	
Name and address for this acknowledgm	- nent	Phone number (optional):	
COPy is (if other than # 4 above).		208-452-3725	
		Secretary of State use only	
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