

FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

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

06 APR 19 PM 2:07

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

YARDS

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Dail L. Bruderer

253 W. White Way, Kuna, ID 83634

Pamela R. Bruderer

253 W. White Way, Kuna, ID 83634

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

Dail Bruderer

253 W. White Way

Kuna, ID. 83634

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

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):

(208) 922-1347

Secretary of State use only

Signature: Dail Bruderer

(signature required)

Printed Name: Dail L. Bruderer

Capacity/Title: Owner

(see instruction # 8 on back of form)

g:\corp\forms\slabn\forms\slabn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
04/19/2006 05:00
CK: CASH CT: 158810 BH: 958193
1 @ 25.00 = 25.00 ASSUM NAME # 2

098966