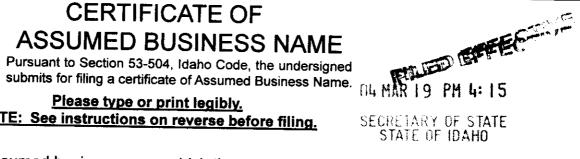


## **CERTIFICATE OF**



NOTE: See instructions on reverse before filing.

1. The assumed business name which the ur business is:	. (NG
<ol><li>The true name(s) and <u>business</u> address(es business under the assumed business name</li></ol>	s) of the entity or individual(s) doing
<u>Name</u>	Complete Address
ERIC L. BOLTS	6807 FAIRUIEN AUE
Rebecca BOLTS	BOISE TO 83704
3. The general type of business transacted ur  Retail Trade	n and Public Utilities
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720
BOISE ZO. 83704	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	nt Phone number (optional):
	Secretary of State use only
Signature du Bolts (signature required)	IDAHO SECRETARY OF STATE  103/19/2004 05:00  CK: 1033 CT: 158010 BH: 734426  1 8 25.00 = 25.00 ASSUM HAME # 2
Printed Name: ERIC LEE BOLTS	IDAHO SECRETARY OF STATE 93/19/2004 05:00 CK: 1033 CT: 158010 BH: 734426
Capacity/Title: <u>owner</u> (see instruction # 8 on back of form)	1 8 25.00 = 25.00 ASSUM NAME # 2

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