FILED EFFECTIVE



Capacity/Title: Owner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME 2004 MAR 22 AM 9: 36

submits for filing a certificate of Assumed Business Name.

Please type or print legibly. NOTE: See instructions on reverse before filing. STATE OF IDAHO

Velma I. R	yder
. The true name(s) and business address(es business under the assumed business nan	ne:
Name	Complete Address
Velma B. Ryder	2712 Laurelhurst Drive
	Boise, ID 83705
The general type of business transacted upon the second se	n and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Velma B. Ryder	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgm copy is (if other than # 4 above): Velma B. Ryder	ent Phone number (optional):
2712 Laurelhurst Drive Boise, ID 83705 nature: (signature required) Atted Name: Velma I. Ryder	Secretary of State use only Secretary of State use only Secretary of State use only IDAHO SECRETARY OF BE

IDAHO SECRETARY OF STATE
03/22/2004 05:00
CK: 9357 CT: 22023 BH: 734638
1 0 25.00 = 25.00 ASSUM HAME # 2