

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

11 SEP-6 AM 9: 32

Please type or print legibly. Instructions are included on back of application.

SECRET BY OF STATE STATE OF IDAHO

	FRANCIS	S UNLIMITED
2.	The true name(s) and <u>business</u> address(est business under the assumed business name Name EDWARD P. FRANCIS	, , , , , , , , , , , , , , , , , , , ,
3.	_	Submit Certificate of Assumed Business
4.	The name and address to which future correspondence should be addressed: FRANCIS UNLIMITED 802 N B STREET COEUR D'ALENE, ID 83814	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	∍nt
		Secretary of State use only
_	ed Name: EDWARD P. FRANCIS	0149935
	city/Title: SOLE PROPRIETOR	IDAHO SECRETARY OF STATE
Signa	ature:	09/07/2011 05:00 CX: 199 CT: 158810 BH: 1289367 1 8 25.80 = 25.88 ASSUM WAME # 2
Printe	ed Name:	