

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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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 under business is:	rsigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) o business under the assumed business name: Name Name Note: 1. The general type of business transacted under the assumed business address(es) or bu	Complete Address 1012 LONGINGN AVE # 100 BUISF IV 83706
Retail Trade	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 Phone number (optional):
Signature: (signature required) Printed Name: (Signature required) Capacity/Title: (See instruction # 8 on back of form)	Secretary of State use only