CERTIFICATE OF ASSU (Please type or print legibly.	JMED BUSINESS NAME See instructions on reverse.
To the SECRETARY OF STATE, ST Pursuant to Section 53-504, lo gives notice of adoption of an	daho Code, the undersigned. All g.
1. The assumed business name which the abusiness is:	undersigned use(s) in the transaction of
The true name(s) and business address(state of the business under the assumed business names.	ame is/are:
<u>Name</u>	Complete Address
Moises Games	4087 Amberly
Marcela Come	Pocatello Io 83202
3. The general type of business transacted under the assumed business name is: (mark only those that apply)	
☐ Retail Trade ☐ Manufacturi☐ Wholesale Trade ☐ Agriculture☐ Construction	Finance, Insurance, and Real Estate
4. The name and address to which future correspondence should be addressed:	Phone number (optional): 208 238 23 40
Pocatello 1083202	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgme copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
Signature:	Revision 1/98
Printed Name: Moises Gomez	IDAHO SECRETARY OF STATE
Capacity: Manager (see instruction #8 on back of form)	CK: 1892 CT: 154579 BH: 434326 1 8 28.08 = 28.08 ASSUM NAME # 2
	1 501/CD

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