CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

	To the SECRETARY OF STATE, STAT Pursuant to Section 53-504, Idah gives notice of adoption of an As	no Code, the undersigned 45 4 12 pu
1.	The assumed business name which the und business is:	dersigned use(s) in the trensaction of
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Name Complete Address	
	Ulssa Dahn I	20E Mayard #213 Boise ID 83700
3.	The general type of business transacted un (mark only those that apply)	der the assumed business name is:
,	Retail Trade	☐ Finance, Insurance, and Real Estate ☐ Mining
4.	The name and address to which future Placerrespondence should be addressed:	none number (optional):395-1384
	Boise ID 837070	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgmen copy is (if other than # 4 above):	Secretary of State 700 West Jefferson t Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		Secretary of State use only 1DAHU SECRETARY OF STATE
Signatu	ire: Madu	В 17/26/2000 09:00 СК: 1444 СТ: 133970 ВН: 336236
Printed	Name: Ol Stoon	1 0 20.00 = 20.00 ASSUM NAME # 2

Capacity:

(see instruction # 8 on back of form)

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