

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

2007 FEB -5 PH 1: 14

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

Places type or print legibly

NOTE: See instructions on reverse before	re filing.
The assumed business name which the und business is:      Trunnell Enterpre	
The true name(s) and business address(es) business under the assumed business nam     Name	) of the entity or individual(s) doing
3. The general type of business transacted un  Retail Trade Transportation  Wholesale Trade Construction	nder the assumed business name is:
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  P.O. Box 40  Clark Foak	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than #4 above):	Phone number (optional):  208-266-1916
	Secretary of State use only
Signature: (signature required)	100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Printed Name: Pay Trunne	25.00 = 25.00 ASSUN NAME #

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Capacity/Title: Duner

(see instruction # 8 on back of form)