CERTIFICATE OF ASSUMED BUSINESS NAME

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

SEGRESS OF STATE OF STATE

FILED EFFECT

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

TREASURE VALLEY Course TOTAL	
The true name(s) and <u>business</u> address(es) business under the assumed business name Name	of the entity or individual(s) doing e: <u>Complete Address</u> 2323 MARBLE FRONT RD c
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to:
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): (208) 459-0116
Signature: <u>FRED L. ELKINS</u> Capacity/Title: <u>OWNER</u>	Secretary of State use only 1000