

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

2007 APR -2 AM 8:59

SECRETARY OF STATE STATE OF IDAHO

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address	
	Tetonia, ID 83452
The general type of business transacted under Retail Trade	
5. Name and address for this acknowledgment copy is (if other than #4 above).	Phone number (optional): 208-456-0100
nature: LONG DV VIII	Secretary of State use only IDAHO SECRETARY OF STATE 04/02/2007 05: