

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.

G3 SEP 18 PH 3: 15

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:	
2. The true name(s) and business address(es) of the business under the assumed business name: Name Tony roomella 121 Lessica Nomella 121	Complete Address
3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: TONY NORY CONTACT CO	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 2083448/08 Secretary of State use only
Signature: Den Mulli- (signature required) Printed Name: To N 7 rucinella- Capacity/Title: President (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 99/18/2003 95:00 CK: 5104 CT: 150010 BH: 702361 1 @ 25.00 = 25.00 ASSUM NAME