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## CERTIFICATE OF ASSUMED BUSINESS NAME

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.
NOTE: See instructions on reverse before filing.

2. The true name(s) and business address(es business under the assumed business nam	r) of the entity or individual(s) doing ne: Complete Address
Shane Walters	2005 Curlew Dr.
	Idaho Falls, ID 83406
Wholesale Trade X Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Shane Walters 2005 Curlew Dr. Idaho Falls, ID 83406  5. Name and address for this acknowledgm copy is (if other man #4 spowe):	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Same as above	Secretary of State use only
Printed Name: Shane Walters Capacity/Title: Sole Proprietor/Owner (see instruction # 8 on back of form)	g.in.g.f.bresidea formskalangist

IDAHO SECRETARY OF STATE

06/20/2003 05:00

CK: 4357 CT: 158010 BH: 687199
1 0 25.00 = 25.00 ASSUM NAME # 2

