

CERTIFICATE OF

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.	
1. The assumed business name which the undersigned use(s) in the transaction of business is: MARSDEN and Associates	
2. The true name(s) and business address(es business under the assumed business name Name Alvin 5. Marspen	
3. The general type of business transacted un	
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: 5636 5. Alyssum Pl. Poise 10 83716	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):	ent Phone number (optional): (208) 384-/036
Signature: Worm Smarker (Signature required) Printed Name: 4/VIN 5 MARS DEN	Secretary of State use only Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE 11/05/2004 05:00
Panality Titles Question Control of the Control of	IDAHO SECRETARY OF STATE 11/05/2004 05:00

S Capacity/Title: (ソルルヒド

(see instruction #8 on back of form)

CK: 2529 CT: 158018 BH: 775182 1 8 25.88 = 25.80 ASSUM HAME # 2