

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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2006 MAY -9 AH 8: 48

STATE OF WARD

1. The assumed business name which the unit business is:		use(s) in the transaction of	
2. The true name(s) and business address(es business under the assumed business name Name KEVIK E. HUNGATE JEHNIFER L. HUNGATE	s) of the er ne:	Complete Address	33404
3. The general type of business transacted un			
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Vevin E- Hungare 4439 Lees Burg circle 1040 FMLS, ID 83404		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	
5. Name and address for this acknowledgm copy is (if other than # 4 above):	ient	Phone number (optional):	
		Secretary of State use only	······································
Signature: Zung G. Jungar Printed Name: Kevin E. Hungarte	glacigitein dash farreimen g65 Recised 042003	n99699	8
Capacity/Title: <u>NWKER</u> (see Instruction # 8 on back of form)	aberset g	CK: 880879 CT: 172899 B	TATE 5 = 00 H: 953841 H NAME # 2