

(see instruction # 8 on back of form)

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. FUED EFFECTIVE

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SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the und business is:	(1)
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Anthony is the contract ted in	
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Hitore Chacartegur Boise ID 83702	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
 Name and address for this acknowledgment copy is (if other than # 4 above): 	t Phone number (optional):
	Secretary of State use only
Signature: Name Anca who Printed Name: Milone Wacawtegn Capacity/Title:	IDAHO SECRETARY OF STATE 94/13/2004 05:00 CK: CASH CT: 158010 BH: 738899 1 2 25.00 = 25.00 ASSUM NAME # 2