

CERTIFICATE OF ASSUMED BUSINESS NAME FILED EFFECTIVE

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

138 AUG - 2 PM 3: 18

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF STATE

1. The assumed business name which the under business is: HANCLUMAN CENTRAL	rsigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) or business under the assumed business name: Name Rick Wilson 3	f the entity or individual(s) doing Complete Address 5/2 E. Emo Ry Au, Nampa ID. 83686
3. The general type of business transacted unde Retail Trade Wholesale Trade Construction Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208-447 - 70.85
Signature Signature (signature required) Printed Name: Rick D. Wilson Capacity/Title: OWNER	Secretary of State use only IDANO SECRETARY OF STATE 08/02/2004 05:00 CK: 1447 CT: 158810 BH: 758738 1 9 25.86 = 25.86 ASSUM NAME # 2

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