FILED EFFECTIVE CERTIFICATE OF ASSUMED BUSINESS NAME

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

09 SEP -9 AM 9: 58

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

Name	rme: Complete Address
Jeffey Denton Hill	215 E 6# S St. Anthony I D 83445
3. The general type of business transacted u	under the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction	on and Public Utilities
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:	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
51. Anthony ID 83445	(208) 334-2301
5. Name and address for this acknowledgm copy is (if other than #4 above):	ient
	Secretary of State use only
nature: SS 62	
nted Name: Jeffery Denton Hill	
pacity/Title: <u>OWNER</u> (see instruction #8 on back of form)	IDAHO SECRETARY OF STATE OF ST

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