

CERTIFICATE OF ASSUMED BUSINESS NAME

CERTIFICATE OF	O En
ASSUMED BUSINESS NA Pursuant to Section 53-504, Idaho Code, the und submits for filing a certificate of Assumed Busine	dersigned
Please type or print legibly. NOTE: See instructions on reverse before fili	ing.
 The assumed business name which the undersignation business is: 	gned use(s) in the transaction of
BREW CRE	EW
The true name(s) and business address(es) of the business under the assumed business name:	
Name Disa Data	Complete Address
Dian Batt	303 W. Orchard Street
	Nampa, ID 83651
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Dian Batt 3204 Manchester Drive Caldwell, ID 83605 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
COpy is (π other than # 4 above).	208-459-0897
	Secretary of State use only
apacity/Title: Owner	IDAHO SECRETARY OF STATE
(see instruction #8 on back of form)	10480 SECREMAT UP STATE 91.45 CT. 159318 PH. 455299

CK: 3345 CT: 158010 BH: 655389 1 0 20.00 = 20.00 ASSUM NAME # 2

