227			
1.	CERTIFICATE OF ASSU (Please type or print legibly.) To the SECRETARY OF STATE, ST Pursuant to Section 53-504, lo gives notice of adoption of an The assumed business name which the	See instructio ATE OF IDAHO Iaho Code, the Assumed Busir	ns on reverse.) FILED o undersigned 99 JAN 19 11 9:03 ness Name.
	business is: Rib Stecrality Foo	ds-	
2.	The true name(s) and business address(business under the assumed business na <u>Tom A GRIFFIN</u> Derich GRIFFIN	ame is/are: <u>Cor</u> <u>6639 Alumm</u>	or individual(s) doing mplete Address <u>el De Bone IOA</u> 83709 el De Bone IOA 83709
	The general type of business transacted (mark only those that apply) Retail Trade Manufactur Wholesale Trade Agriculture Services Constructio The name and address to which future correspondence should be addressed:	ing 🗌 Tra 🗌 Fin n 🗌 Mir	med business name is: Insportation and Public Utilities Iance, Insurance, and Real Estate hing r (optional): <u>208 - 376 - 879 /</u>
5.	SANC Name and address for this acknowledgm	ent	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West
	COPY IS (if other than # 4 above):	Revision 1,968	PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IMHD SEDRETARY OF STATE 01/19/1999 09:00
Signature: MM / / //// / ///		æ	CK: 1941 CT: 109799 IN: 179781 1 8 20.08 = 20.00 ASSUM MINE 8 2
Printed Name: Tom A GRIFFIN D22309			D22309
Capacity: <u>OWNER</u> (see instruction # 8 on back of form)			