## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED EFFECTIVE 08 FEB - 1 PM 2: 12

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.

SECRETARY OF STATE STATE OF IDAHO

A D R I A T  2. The true name(s) and business address(es	s) of the entity or individual(s) doing
business under the assumed business nar Name	ne: Complete Address
RASEMA HUSIC	11568 W ILVING ST
	Boise ID 83712
3. The general type of business transacted under the last of the	Submit Certificate of Assumed Business
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent
	Secretary of State use only
gnature: <u>Posema</u> Husec (signature required) Inted Name: RASEMA HUSIC	IDAHO SECRETARY OF STATE  ### ### ### ### ### ### ### ### ### #