

CERTIFICATE OF ASSUMED BUSINESS NAME

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. 2006 OCT 24 AM 8: 28

SECREMENT OF STATE STATE OF IDAHO

2. The true name(s) and business address(es	
business under the assumed business nan Name	ne: Complete Address
Stephanie Alice Boaz	1941 E. Doberman Drive
	Meridian, ID 83642
The general type of business transacted un	nder the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction	n and Public Utilities
Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Stephanie A. Boaz 1941 E. Doberman Drive Meridian, ID 83642 5. Name and address for this acknowledgme copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
ignature:(signature required) rinted Name: Stephanie Alice Boaz	IDAHO SECRETARY OF STATE 10/24/2006 05: CK: 5212 CT: 295793 BH: 9