

Signature:

Printed Name:

Capacity/Title:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

14 DEC 10 AM 11:56

SECRETARY OF STATE Please type or print legibly. NOTE: See instructions on reverse before filing. STATE OF IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is: 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Rebecca Kino 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 700 West Jefferson **Basement West** PO Box 83720 Boise ID 83720-0080 208 334-2301 5. Name and address for this acknowledgment Phone number (optional): CODY IS (if other than # 4 above). 208-387-1723 Secretary of State use only

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IDAHO SECRETARY OF STATE 12/10/2004 05:00 CK: 2915 CT: 158818 BH: 780923 1 0 25.00 = 25.00 ASSUM NAME # 2