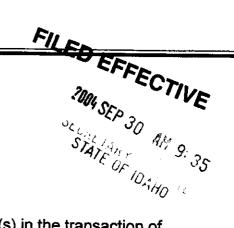


## CERTIFICATE OF ASSUMED BUSINESS NAME

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.



The assumed business name which the urbusiness is:	ndersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es business under the assumed business nan Name  MARK TAY HUGHES	s) of the entity or individual(s) doing ne: <u>Complete Address</u> 2826 Deuvor Foxed Faus, ID 83402
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:  MARK HUGHES  2826 DRUVOR  IDAdo FACLS, FD 83402	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol><li>Name and address for this acknowledgme copy is (if other than # 4 above):</li></ol>	Phone number (optional):  208 523 4663
Signature: (signature required)  Printed Name: MARK (HUG Hz S	Secretary of State use only    Secretary of State use only
Capacity/Title: <u>OWNI-W</u> (see instruction # 8 on back of form)	1 0 25.00 = 25.00 ASSUM NAME # 2