

Signature:\_

Printed Name: CASES

Capacity/Title: OWNER

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

2005 Min DE EFFECTIVE

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 true name(s) and business address(es) obusiness under the assumed business name	of the entity or individual(s) doing
Name	Complete Address
CASEY YOUNG	708 S. Merton Ave Sandpoint ID 83864
CASEY YOUNG  TOB S. MERTON AVE.  SANDPOINT, ID 83864	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgment copy is (if other than # 4 above):</li> </ol>	Phone number (optional): 208 610 5777

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IDAHO SECRETARY OF STATE @7/25/2005 05:00 CK: 1601 CT: 150010 BH: 822952 1 0 25.00 = 25.00 ASSUM NAME # 2

