

CERTIFICATE OF ASSUMED BUSINESS NAME FILED 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. ALCHETARY PL STATE OF IDAHO

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Output Output	
M. Kathleen Lee	223 N. Sherwood Dr., Nampa, ID 83651
3. The general type of business transacted un	nder the assumed business name is:
Retail Trade I Transportation Wholesale Trade Construction	Taria Tubilo Otinado
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
•	Secretary of State
4. The name and address to which future	700 West Jefferson
correspondence should be addressed:	Basement West
M. Kathleen Lee	PO Box 83720
223 N. Sherwood Dr.	Boise ID 83720-0080
Nampa, ID 83651	208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent Phone number (optional):
	Secretary of State use only
	vo
G-24-0	SECRETARY OF STA
gnature: STATO (signifure required)	forms / 22003
inted Name: M. Kathleen Lee	Revieed 04/2003
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apacity/Title: Owner	IDAHO SECRETARY OF STA