CERTIFICATE OF ASSUMED BUSINESS NAME

	FILED EFFE
CERTIFICATE OF ASSUMED BUSINESS NA Pursuant to Section 53-504, Idaho Code, the une submits for filing a certificate of Assumed Busine Please type or print legibly. NOTE: See instructions on reverse before file	dersigned Paragraphic States Name.
The assumed business name which the undersibusiness is: Salmon River	igned use(s) in the transaction of
The true name(s) and business address(es) of the business under the assumed business name: Name Cindy Phelps	the entity or individual(s) doing Complete Address 90 Aldous Dr. Salmon, ld 83467
The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Cindy Phelps 90 Aldous Dr.	
Salmon, ID 83467 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State use only
nature:	IDAHO SECRETARY OF STATE 93/28/2008 95:9 CK: 4317 CT: 158010 BH: 11070 1 8 25.00 = 25.00 ASSUM NAME D /20374