

CERTIFICATE OF ASSUMED BUSINESS NAME

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

05 APR 19 AM 9: 17

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the undersigned business is:	d use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the e business under the assumed business name: Name HARBY P. VIRCH 209 ME	ntity or individual(s) doing Complete Address O SCIOTO PLACE RINIAN, ID 83XH2
3. The general type of business transacted under the a Retail Trade Transportation and Pub Wholesale Trade Construction Agriculture Manufacturing Mining	
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: 2090 SCIOTO PLAGE MERINIAN, ID 83642	Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): (208)407-1028
	Secretary of State use only
Signature: Signature: (signature required) Printed Name: HARRY P V I RCH Capacity/Title: Owner Capacity/Title: Owner	IDAHO SECRETARY OF STATE Ø4/19/2005 @5:00 CK: 516307 CT: 172099 BH: 805445 1 @ 25.00 = 25.00 ASSUM NAME # 2