	OF ASSUMED BU (Please type or print legibl			
To the SECRETARY Pursuant to Se gives notice o	(Please type or print legible OF STATE, STATE OF IDection 53-504, Idaho Code fadoption of an Assumed I	DAHO \$, the unders Business Na	SECRETARY OF STATE OF IDAHO	
 The assumed bus business is: 	siness name which the unc $4/5$ Constuct	lersigned us		
The true name(s) business under the	and business address(es) ne assumed business nam	e is/are:		ing
Name DOW Murphy		Complete Address Mangu II 632-51ADIUM Harps		
3. The general type (mark only those that	of business transacted un	der the assu	ımed business nan	ne is:
Retail Trade Wholesale T Services	J1	[] Fir	ansportation and Pr nance, Insurance, a ning	
 4. The name and address to which future correspondence should be addressed: Don Murphy 632 Stadium Name and address for this acknowledgment 		ı	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West	
copy is (if other than # Farmers +1 P.O. Box	· · · · · · · · · · · · · · · · · · ·	PO Box 83720 Boise ID 83720-0 208 334-2301		
Nampa, Signature: Canal	Revision 2/57	2 26844 CT: 45880 BH:	se only E :: P x 6363 1 98464 If NAME # 2	
Printed Name: <u>Dow</u> Capacity: <u>Own e</u> (see instruction #	<i>a</i> ,	ano namerano me	\ 23383	3