CERTIFICATE OF	FILED EFFECTIVE
ASSUMED BUSINESS NAM Pursuant to Section 53-504, Idaho Code, the undersi submits for filing a certificate of Assumed Business N	igned USAUG28 PM 1.02
Please type or print legibly. NOTE: See instructions on reverse before filing.	SECRETARY OF STATE STATE OF IDAHO
1. The assumed business name which the undersigned use(s) in the transaction of business is:	
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Complete Address Complete Address Complete Address Log hoop PostFalls Idaho 83554	
 3. The general type of business transacted under the a Retail Trade Transportation and Pub Wholesale Trade Aconstruction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Sam Fischer 2654 Partridge Loop 10557 Falls Job 93854 5. Name and address for this acknowledgment copy is (if other than #4 above): 	
Signature: <u>San Hischer</u> Printed Name: <u>San Hischer</u> Capacity/Title: <u>Dwner</u> (see instruction # 8 on back of form)	Becretary of State use only IDAHO SECRETARY OF STATE OB/28/2008 O5:00 CK: 139087 CT: 158010 BH: 1133620 1 @ 25.00 = 25.00 ASSUM NAME # 2000
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