

Capacity/Title: Co-Own CR

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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.

FILED EFFECTIVE

SECRETARY OF STATE STATE OF IDAHO

	,
1. The assumed business name which the undersigned business is: ABCR Group Fraue)	
2. The true name(s) and business address(es) of the business under the assumed business name: Name Ronald B trues at 5R 21(Brenda 4 Russell 46)	entity or individual(s) doing Complete Address 2 West Haveyswelle Ave y den Tanko 83835
3. The general type of business transacted under the Retail Trade Transportation and Pu Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: DID West Hawel Suckse Ave Haydan Talaho 83835	
5. Name and address for this acknowledgment copy is (if other than # 4 above): Same AS ABOVE Signature: Kould B. Rucks (Agrature required)	Secretary of State use only
	IDANO SECRETARY OF STATE

IDANO SECRETARY OF STATE 01/22/2010 05:00 CK: 1881 CT: 158810 BH: 1294547 1 8 25.88 = 25.88 ASSUM NAME N 2

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