

CERTIFICATE OF ASSUMED BUSINESS NAME

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

03 MAY -9 PM 3: 56

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

d use(s) in the transaction of Amizacca
ntity or individual(s) doing Complete Address Lochmendow St. John FD 83642
Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Phone number (optional):
IDANO SECRETARY OF STATE 95/09/2003 95:00 CK: CASH CT: 158818 BN: 679833 1 8 25.00 = 25.00 ASSUN NAME # 2