

## CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

EFFECTIVE

63 JUL 19 PH 2: 37

SECHE DE STATE STATE CE IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

The assumed business name which the ur business is:	
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name  Revekka Pronina	s) of the entity or individual(s) doing me: <u>Complete Address</u> <u>892 Stormy dz.</u> mezidian ID 83642
3. The general type of business transacted under the assumed business name is:  Retail Trade Transportation and Public Utilities Wholesale Trade Construction	
Services	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  892 Stormy dr.  meridian 17 83642	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol><li>Name and address for this acknowledgme copy is (if other than # 4 above):</li></ol>	ent Phone number (optional): (208) 884 - 8303
	Secretary of State use only
Signature: <u>Promina</u> July Printed Name: <u>Revekka Pronina</u> Capacity/Title:	IDAHO SECRETARY OF STATE 97/19/2005 05:00 CK: 148 CT: 158010 BH: 822879 1 9 25.80 = 25.00 ASSUM HAME # 2