

CERTIFICATE OF ASSUMED BUSINESS NAME

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

65 HAY 17 AM II: 29

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

NOTE: See instructions on reverse before filing.	SECRETARIA DA STATE STATE DE DAHO
The assumed business name which the undersigned business is:	-
According To ME	
2. The true name(s) and <u>business</u> address(es) of the elbusiness under the assumed business name:	ntity or individual(s) doing
<u>Name</u>	Complete Address
For Dillow 1535	N 9/4 E, Af Hom 8364,
TONDA (37130ms	
3. The general type of business transacted under the and Retail Trade Transportation and Public Wholesale Trade Construction Agriculture Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
For Diceon Konos Grosses	Secretary of State use only
Signature: Signature required) Printed Name: Sono Constant Capacity/Title: Constant Capacity/Ti	IDAHO SECRETARY OF STATE 95/17/2005 95:00 CK: 2662 CT: 186965 BH: 818948 1 B 25.00 = 25.00 ASSUM HAME # 2

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