

CERTIFICATE OF ASSUMED BUSINESS NAME

	FILED SS NAME a, the undersigned
CERTIFICATE O	E CARA
ASSUMED BUSINES	SC NAME SON
Pursuant to Section 53-504, Idaho Code submits for filing a certificate of Assumed	the undersigned d Business Name.
Please type or print legibly. NOTE: See instructions on reverse bet	fore filing.
The assumed business name which the u business is:	undersigned use(s) in the transaction of
Idaho	o Mediation
The true name(s) and business address(e business under the assumed business name).	es) of the entity or individual(s) doing ame:
Name	Complete Address
Robert Blyth	1208 Atlantic
	Idaho Falls, ID 83404
Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Robert Blyth 1208 Atlantic; Idaho Falls, ID 83404	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgm copy is (if other than # 4 above):	
copy to (il other than # 4 above).	208-403-7681
	Secretary of State use only
ignature: (Signature required) Printed Name: Robert Blyth Capacity/Title: Parnter	Groons and DAHO SECRETARY OF STOTE
(see instruction #8 on back of form)	IDAHO SECRETARY OF STATE 91/98/2993 95:299 CK: 2336 CT: 158818 PH: 65536

20.80 = 20.00 ASSUM NAME # 2 D6/250