

## CERTIFICATE OF ASSUMED BUSINESS NAME

2005 SEP 22 AM 9: 23

FILED EFFECTIVE

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

SECRETARY OF STATE STATE OF FOUND

Please type or print legibly. NOTE: See instructions on reverse before filing.

Owner

(see instruction # 8 on back of form)

Capacity/Title:\_\_

The true name(s) and business address(es) of the true name(s) and business name(s)	ne entity or ind	ividual(s) doing	
business under the assumed business name:  Name  Lynda Berggren	Complete Address 31 East 600 North		
Lynda 00.93.4	Blackfo	Blackfoot, Idaho 83221	
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:  Lynda Berggren  31 East 600 North	Subn Assu Nam Secr 700 Base PO B Bois	nit Certificate of med Business e and \$25.00 fee to: etary of State West Jefferson ement West Box 83720 e ID 83720-0080 334-2301	
Blackfoot, Idano 83221  5. Name and address for this acknowledgmen copy is (if other than # 4 above):	<u> </u>	e number (optional): 208-785-3186	
		Secretary of State use only	
gnature: Symbol Burguired)  rinted Name: Lynda Berggren	tormsvabn formsvabn p65 Revised 04/2003	IDAHO SECRETARY 0 09/22/2005 CV. 5485 / 184258	

IDAHO SECRETARY OF STATE

09/22/2005 05:00

CK: 5485 CT: 184258 BH: 912984

1 0 25.00 = 25.00 ASSUM NAME # 2

D91920