## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO 01 MAY -9 AM 8: 54  Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business NY OF STATE	
gives notice of adoption of an analysiness is:	Masuried Business Name of Indum
business is:	STALL NAY
2. The true name(s) and business address(es) of the entity or individuates designed business under the assumed business name is/are:	
Name	Complete Address S
LORENE OATES	Boise IN B3712
3. The general type of business transacted under the assumed business name is:	
Retail Trade Manufacturir Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate
The name and address to which future Phone number (optional):  correspondence should be addressed:	
SANDER  321 HILLVIEW DR	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
5. Name and address for this acknowledgment copy is (if other than #4 above):    ORENE ORTES	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
321 HILLUIEN DR	208 334-2301  Secretary of State use only
Signature: Signature:	© 65/10/2001 69:00 CX: 2824 CT: 189147 BH: 3%352
Printed Name: KAKEN DANNER	1 0 20.00 = 20.00 ASSUM NAME # 2
Capacity:(see instruction # 8 on back of form)	D45212