

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/EFFECTIVE

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

OI JUN 14 AMII: 09 SECRETARY OF STATE STATE OF IDAMO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersign business is:	gned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Lvy Axelton P.C. Tames M Axelton P.C.	Complete Address D. BOX 140096 Garden City F3714 BOX 140096 Garden City 83714
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: ### Lo. Box 140096 Garden City \$3714 5. Name and address for this acknowledgment copy is (if other than #4 above):	
Signature: Janes M. Axelfon Printed Name: Try Axelfon James M. Axelfon Capacity: Partners (see instruction # 8 on back of form)	Secretary of State use only IDAHO SECRETARY OF STATE 26/14/2001 99:00 CK: CASH CT: 147588 BH: 482786 1 2 28.88 = 28.88 ASSUM WAME 1 2