

CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 JAN - 4 AM 9: 25 SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersign business is:	ed use(s) in the transaction of
· · · · · · · · · · · · · · · · · · ·	
Reverend Sage Lee	
2. The true name(s) and business address(es) of the	entity or individual(s) doing
business under the assumed business name:	O tale Address
Name	Complete Address
MINY JOHNSTON 360	Blossom Dr.
3. The general type of business transacted under the	assumed business name is:
Retail Trade Transportation and P	ublic Utilities
Manufacturing Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
,	Idaho Secretary of State
The name and address to which future correspondence should be addressed:	450 N 4th Street
	PO Box 83720 Boise ID 83720-0080
Reverend Sage Lee	(208) 334-2301
350 DIOSSOM DI	(200) 33+2301
Jaano talls, IU, while	
 Name and address for this acknowledgment copy is (if other than # 4 above): 	
Miry Johnston	
350 Blossom Dr.	Secretary of State use only
Idaho Falls, ID, 834d	
Signatures Milk L Admitted	017471
Signature: Signature required)	- 5 (1
Printed Name: M. W. Johnston	IDAHO SECRETARY OF STATE
Signature: Mily Johnston Printed Name: My Johnston Capacity/Title: Owner	01/04/2008 05:01 CK: 2675 CT: 221074 RH: 10927
(see instruction # 8 on back of form)	1 0 25.00 = 25.00 ASSUM NAME