

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2005 DEC -5 PM 2: 44

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

	SECHETARY OF STATE
 The assumed business name which the undersign business is: 	gned use(s) in the transaction of
	ANS.
The true name(s) and business address(es) of the business under the assumed business name: Name	ne entity or individual(s) doing Complete Address
MUSTAFA CERIMAGIC 6 B	995 W. IRVING IN. OISE, ID 83704
3. The general type of business transacted under the	ne assumed business name is:
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: MUSTAFA CERIMAGIC 6995 W. IRVING LIN BOISE IS \$3704 5. Name and address for this acknowledgment	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
COPY is (if other than # 4 above):	
4 4 4	Secretary of State use only
Signature: MHAGO (MULLIUM CONTROL CERIMAGIC Printed Name: MUSTAFA CERIMAGIC Capacity/Title: OWNER	
Printed Name: MUSTAFA CERIMAGIC	
Capacity/Title: OWNER (see instruction # 8 on back of form)	IDAHO SECRETORY OF CTOTA

IDAHO SECRETARY OF STATE
12/06/2005 05:00
CK: 1725 CT: 158010 BH: 925266
1 8 25.80 = 25.80 ASSUM NAME # 2

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