

CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 SEP -3 AM 8: 40

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

Yo	ur Color
The true name(s) and <u>business</u> address(e business under the assumed business na <u>Name</u> Sue Macartney	
3. The general type of business transacted to Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	on and Public Utilities Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: 2559 N Turnberry Way, Meridian, ID 83646	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent
	Secretary of State use only
gnature:	
inted Name: Sue Macartney	
apacity/Title: Owner	IDAHO SECRETARY OF STATE
gnature:	. 09/03/2010 05:00 CK: 1085 CT: 158010 BH: 1237472
inted Name:apacity/Title:apacity/Title:	1 @ 25.00 = 25.00 ASSUM NAME #

abn.pmd Rev.07/2010

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