(see instruction # 8 on back of form)



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.

Please type or print legibly. NOTE: See instructions on reverse before filing. 65 JAN 31 PH 2: 17

STATE OF IDAHO

	ss(es) of the entity or individual(s) doing
business under the assumed busine <u>Name</u>	s name: <u>Complete</u> Address
DANIEL L. WOCKSTON	2140 0RAM AV
	EAGLE ID \$3616
3. The general type of business transac	ed under the assumed business name is:
☐ Retail Trade ☐ Transpo	tation and Public Utilities
Services Agricul	Submit Certificate of
☐ Manufacturing☐ Finance, Insurance, and Real I	Assumed Business Name and \$20.00 fee to:
4. The name and address to which futu	
correspondence should be addresse	Basement West
2140 N. RAM AU.	PO Box 83720 Boise ID 83720-0080
EAGLE , DO 83616	208 334-2301
5. Name and address for this acknowle	dgment Phone number (optional):
COPy is (if other than # 4 above):	205-939-4058
	Secretary of State use only
0 0 1/10	
Signature: (signature required)	IDAHO SECRETARY OF STATE
Printed Name: DANTEL WOOLS	01/31/2003 05:00 CK: 774 CT: 158610 BH: 668387
Capacity/Title: <u> </u>	1 8 20.00 = 20.00 ASSUM NAME # 2