(see instruction # 8 on back of form)

227



## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIV

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

7903 NOV 28 AM 9: 19

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF TOAHO

2. The true name(s) and <u>business</u> addre business under the assumed business	ess(es) of the	entity or individual(s) doing
<u>Name</u>		Complete Address
	<u> </u>	5 N' Lincoln, Post Falk, 7 83854
3. The general type of business transactor	ed under the	assumed business name is:
Retail Trade Transport Wholesale Trade Construct	tation and Pu ction	iblic Utilities
Services	іге	Submit Certificate of
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Es	state	Assumed Business Name and \$25.00 fee to:
<ol> <li>The name and address to which future correspondence should be addressed:</li> </ol>		Secretary of State 700 West Jefferson
Part T S 11		Basement West
Company of the		PO Box 83720 Boise ID 83720-0080
1605 & Line ela	P-1-1	208 334-2301
5. Name and address for this acknowled	 Igment	Phone number (optional):
COPy IS (if other than # 4 above):	269 1112 Well 13	
, ,		
		Secretary of State use only

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