

CERTIFICATE OF ASSUMED BUSINESS NAME FILED EFFECTIVES ASSUMED BUSINESS NAME FILED EFFECTIVES Output Display to the undersigned of the Undersign **CERTIFICATE OF**

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.

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the undersig business is:	ned use(s) in the transaction of
2. The true name(s) and business address(es) of the business under the assumed business name: Name TUDY M. HOPKINS 140	e entity or individual(s) doing Complete Address S S EANPIRE BOISE, ID 83709
3. The general type of business transacted under the Retail Trade Transportation and Pull Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: TUDY M. HOPKIMS 1408 S EMPIRE BOISE, ID \$3709 5. Name and address for this acknowledgment copy is (if other than #4 above):	
Signatures	Secretary of State use only
Signatures Printed Name: JUDY M. HOPKINS Capacity/Title: OWNER. (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 10/01/2004 05:00 CK: 1172 CT: 158818 BH: 769841 1 8 25.88 = 25.88 ASSUM MANE # 2