

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

CERTIFICATE OF  ASSUMED BUSINESS NAI  Pursuant to Section 53-504, Idaho Code, the under submits for filing a certificate of Assumed Business  Please type or print legibly.  NOTE: See Instructions on reverse before filing	signed Name.
1. The assumed business name which the undersign business is:  My Favon to the these sections are the sections and the section of the sectio	ed use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name:  Name  My, Foughte thungs 9/7	entity or individual(s) doing  Complete Address
THE JERRICH 12692 W.  CONTYN SHILL 12692 W.  3. The general type of business transacted under the	Lewis Care Naught FD &
Retail Trade Transportation and P  Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	1
4. The name and address to which future correspondence should be addressed:  Lat DERRICK  Canolyw Sewnich	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	Phone number (optional): 467. 3452
Signature: Miliek Devreck	Secretary of State use only
Printed Name: HATRICK LERRICH	

Capacity/Title: OWHEK - Dontweh (see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE 07/29/2005 05:00 CK: 42% CT: 158010 DH: 823969 1 6 25.00 = 25.00 ASSUM NAME # 2

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