

## **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. 2007 JAN 24 AN 9: 18

Please type or print legibly. NOTE: See instructions on reverse before filing.

The assumed business name which the undersignation business is:      Crfect Break System	,``
2. The true name(s) and business address(es) of the business under the assumed business name:  Name  Michael W. Peiwer 230  Ray	entity or individual(s) doing  Complete Address  Our Hollyhock hn.
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and Po	ublic Utilities
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:	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):
	Secretary of State use only
Signature:	OKT498  IDAHO SECRETARY OF STATE
Capacity/Title: (see instruction # 8 on back of form)	01/24/2007 05:00 CK: 2143738 CT: 158010 BH: 1028307 1 9 25.00 = 25.00 ASSUM NAME # 2