

(see instruction # 8 on back of form)

## **CERT FICATE OF** ASSUMED BUSINESS NAME

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

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

The assumed buşiness name which the undersign business is:      Stuart Con Sur	
2. The true name(s) and business address(es) of the business under the assuned business name:  Name  Jainne Study 34	entity or individual(s) doing  Complete Address  14 E. Nough & Bray Dr.  When ID 83234
3. The general type of business transacted under the  Retail Trade Transportation and Put Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance and Real Estate  4. The name and address to which future correspondence should be addressed:  3414 E Mount Fray	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	208 334-2301  Phone number (optional):  208 8 9 7 5 2 0 8
Same.	Secretary of State use only
Signature: Jame Stuart  Printed Name: Jame Stuart  Capacity/Title: Munco	IDAHO SECRETARY OF STATE    08/02/2004   05:00   CK: 8766   CT: 158010   BH: 758478   1 0 25.00 = 25.00   ASSUM NAME #