

CERTIFICATE OF ASSUMED BUSINESS NAME

08 SEP -8 AM 9: 13

FILED EFFECTIVE

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

SECRETARY OF STATE STATE OF IDAHO

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

The assumed business name which the under business is:	ersigned use(s) in the transaction of
The true name(s) and business address(es) business under the assumed business name Name STEVEN A. SCHARN	of the entity or individual(s) doing Complete Address P.O. BOX 39 14 (MAILING) 37ZO WOODSIDE BLVP. HAILLY, ID. 83373
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: TEVE SCHARY P.O. BOX 3914	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmer copy is (# other than # 4 above):	Phone number (optional): (208) 720 - 8577
	Secretary of State use only

Printed Name: STERN A. SCHNEN

Capacity/Title: OWNEL

(see Instruction # 8 on back of form)

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