

CERTIFICATE OF

ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, submits for filing a certificate of Assumed I Please type or print legibly. NOTE: See instructions on reverse before 1. The assumed business name which the unbusiness is:	the undersigned Business Name. Pre filing. Indersigned use(s) in the transaction of	FILED EFFECTIVE
2. The true name(s) and business address(es business under the assumed business nan Name Twothy J Rocco	of the entity or individual(s) doing ne: Complete Address PO Box 5930 Ketchum, ID 83340	m
3. The general type of business transacted ur Retail Trade Transportation Wholesale Trade Construction X Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business	
4. The name and address to which future correspondence should be addressed: Timothar Rocco PO Box 5930 Ketchum, ID 83340	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
5. Name and address for this acknowledgme copy is (if other than # 4 above):	Phone number (optional):	
nature: Timothy J. Rocco	Secretary of State use only 99d upper to the secretary of State use only 10007/0 per to the secretary of State 11/15/2004 05:00	3

Sig

Prin

Capacity/Title:

(see instruction # 8 on back of form)

CK: 140 CT: 158010 BH: 776357 1 8 25.00 = 25.00 ASSUM NAME # 2