227	
CERTIFICATE OF	
ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned	
submits for filing a certificate of Assumed Business Name.	
Please type or print legibly.	
NOTE: See instructions on reverse before filing.	
1. The assumed business name which the undersigned use(s) in the transaction of	
Stop Loss Predator Control	
2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing	
business under the assumed business name: <u>Name</u>	
	Complete Address
Gary J. Plocher	P.O. Box 182
Suzanne T. Plocher	Murtaugh ID
	83344
3. The general type of business transacted under the assumed business name is:	
Retail Trade     Transportation and Public Utilities     Wholesele Trade     Construction	
Wholesale Trade Construction	
	Submit Certificate of
	Assumed Business Name and <b>\$20.00</b> fee to:
Finance, Insurance, and Real Estate	
<ol><li>The name and address to which future correspondence should be addressed:</li></ol>	Secretary of State
	700 West Jefferson Basement West
Gary J. Plocher	PO Box 83720
323 Oak St. N.	Boise ID 83720-0080
Kimberly ID \$3341	208 334-2301
5. Name and address for this acknowledgment Phone number (optional):	
COPY IS (if other than # 4 above):	i fielle fiditibel (optional).
	Secondary of Ohn
	Secretary of State use only
la Cal	
Signature:	IDAHO SECRETARY OF STATE
Printed Name: Gary J. Plocher	11/19/2002         05 : 20           CK: 1014         CT: 158010         BH: 646835           1 1 20.00 =         20.00         ASSUN NAME # 2
Capacity: Owner	
Signature: $\underline{IDAHO}$ SECRETARY OF STATE 11/19/2002 05 = 00 Printed Name: $\underline{Gary J. Plocher}$ Capacity: $\underline{Owner}$ (see instruction # 8 on back of form)	