FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2010 AUG 17 AM 11: 49

SEUNETARY OF STATE STATE OF IDAHO

<u>Please type or print legibly.</u> Instructions are included on back of application.

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The assumed business name which the business is:	ne undersigned use(s) in the transaction of
	finerva's Hand
The true name(s) and <u>business</u> address business under the assumed business	s name:
<u>Name</u>	Complete Address
Kimanh Conway	2741 W. Broadmoore Dr., Hayden, ID 83835
3. The general type of business transacte	
 ✓ Retail Trade ✓ Wholesale Trade ✓ Services ✓ Manufacturing ✓ Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed. Kimanh Conway	450 North 4th Street PO Box 83720
2741 W. Broadmoore Dr.	Boise ID 83720-0080 208 334-2301
Hayden, ID 83835	250 051 2501
5. Name and address for this acknowledge copy is (if other than # 4 above):	gment
	Secretary of State use only
ignature:	
rinted Name: Kimanh Conway	
Capacity/Title: Owner	IDAHO SECRETARY OF STATE
ignature:	08/17/2010 05:00 CK: 496579 CT: 172899 BH: 1235151
Printed Name:	1 0 25.00 = 25.00 ASSUN NAME # 2
Capacity/Title:	_
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