CERTIFICATE OF ASSUMED BUSINESS NAME

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

06 SEP.29 AM 9: 00

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

SECREMY OF STATE

2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:	
	Name DONATHON SANDERS	9 N.SUGAR ST. #102
		NAMPA IDAHO 83687
3.	The general type of business transacted u	Inder the assumed business name is:
		on and Public Utilities
	Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
	The name and address to which future correspondence should be addressed: 9 N SUCAR ST. #102 AJAMPA JOAHG 83687	Secretary of State 700 West Jefferson Basement West PO Box 83720 Bofse ID 83720-0080 208 334-2301
_	Name and address for this acknowledgme copy is (if other than # 4 above):	ent Phone number (optional):
5.		the state of the s
5.		Secretary of State was only
	ura:	ggd uses
gnat	Wes: Jon HTHON SAWDERS	Secretary of State use only

CK: CASH CT: 158010 BH: 977759 1 8 25.00 = 25.00 ASSUN NAME # 2

D104 289