

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

08 SEP 25 AM 8: 46

-- SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

2. The true name(s) and business address(es)	
business under the assumed business name Name hung Mm/Beu/	Complete Address 2.0 Box S194 Kerchum ID F331
3. The general type of business transacted und Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	er the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Human Maysen Ro Bot 5190 Lecuron TO \$33+0	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	Secretary of State use only
nature: My May Ben/ nted Name: Hum My Ben/ pacity/Title: Ownel	IDAHO SECRETARY OF STATE 99/25/2008 05:01 CK: 2680 CT: 230620 BH: 11375: 1 9 25:00 = 25:00 ASSIM NAME