



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

09 SEP -8 AM 9:05

SECRETARY OF STATE
STATE OF IDAHO

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 business is:

new 2 u

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

michael dwain pulsifer

dee etta wooten

Complete Address

1644 addison ave east twin falls id. 83301

1644 addison ave. east twin falls id. 83301

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

michael pulsifer/ dee wooten

2935 b rock creek road

hansen id. 83334

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Secretary of State use only

Signature: *Michael Pulsifer*

(signature required)

Printed Name: michael pulsifer/ dee wooten

Capacity/Title: owners

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
09/08/2009 05:00
CK: 388183 CT: 172099 BH: 1186114
1 @ 25.00 = 25.00 ASSUM NAME # 2

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