

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.

2007 MAY -9 AM 8: 06

SECRETARY OF STATE -STATE OF IDAHO

D111246

 The assumed business name which the un business is: 	dersigned use(s) in the transaction of
Spual Hollow	Graphics
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name Hend Orderson Jerri C. Canderson	a) of the entity or individual(a) doing
3. The general type of business transacted und	
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Lent Anderson	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen copy is (if other than #4 above):	Phone number (optional): 208: 1010 - 12-01
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE
Printed Name: <u>hent anderson</u>	CK, 5(3)387 55 007 05 00
(see instruction # 6 on back of form)	1 0 25.60 = 25.60 ASSUM NAME # 2