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CERTIFICATE O ASSUMED BUSINES Pursuant to Section 53-504, Idaho Code, submits for filing a certificate of Assumed Please type or print legibly. NOTE: See instructions on reverse before	S NAME the undersigned Business Name.
1. The assumed business name which the un business is:	SIALE OF IDAIN
2. The true name(s) and business address(es business under the assumed business nan Name <u>Hescy Lynn (Widney</u>	s) of the entity or individual(s) doing ne: <u>Complete Address</u> <u>1935. Wheat Field Ln</u> <u>Jdaho Falls, 2083404</u>
 Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: <u>herry Widney</u> <u>1935</u>. <u>Wheat Field (n</u>) <u>baho Falls</u>. <u>TD 83404</u> 	and Public Utilities 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
 Name and address for this acknowledgmen copy is (if other than #4 above): 	t Phone number (optional): <u> </u>
	Secretary of State use only
Signature: <u>MUTHAN</u> Printed Name: <u>Kerry L. Widney</u> Capacity/Title: <u>AWNER / Manager</u> (see instruction # 8 on back of form)	S0 IDAHO SECRETARY OF STATE Ø7/31/2006 Ø5 = 00 CK: 1204 CT: 282875 S0 1 = 25.00 = 25.00 ASSUM NAME # 2 DID2279