CERTIFICATE OF	FILED EFFECTIVE
ASSUMED BUSINESS NAM Pursuant to Section 53-504, Idaho Code, the undersi submits for filing a certificate of Assumed Business N	
Please type or print legibly. NOTE: See instructions on reverse before filing.	SECRETARY OF STATE STATE OF DAYO
1. The assumed business name which the undersigned business is: <u>Mangelson</u> Suzuki	
2. The true name(s) and business address(es) of the e business under the assumed business name: Name TawnaLyn MangelSon 108 Ba	ntity or individual(s) doing Complete Address 59 W. Albany St 515t, ID 83713
3. The general type of business transacted under the a	assumed business name is:
Retail Trade       Transportation and Put         Wholesale Trade       Construction         Services       Agriculture         Manufacturing       Mining         Finance, Insurance, and Real Estate         4. The name and address to which future correspondence should be addressed:         Tawnalyn       MangelSon         J0859       Albany         Struct       Top Struct	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
<ol> <li>Name and address for this acknowledgment COpy is (if other than # 4 above):</li> </ol>	Phone number (optional): 208-376-1447
	Secretary of State use only
Signature: AMADY Manulan Printed Name: Tawnalun Mangekon Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STAT 03/14/2007 05: CK: 2688 CT: 158910 BH: 10 1 0 25.00 = 25.00 ASSUM N