

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.

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SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the undersigned business is: (a.SS) (b.S.S.) (b.S.S.) (c. A.S.S.)	
2. The true name(s) and <u>business</u> address(es) of the enbusiness under the assumed business name: 1308 Box	Complete Address 2 VISTA AVE ISE, III 83705
 The general type of business transacted under the and Retail Trade Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 	
4. The name and address to which future correspondence should be addressed: ASSANARA BENSON 715 W. Ubuca St. Boise, ID 83706	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): (208).571-10051

Signature:

Printed Name:

Capacity/Title: OWA

(see instruction # 8 on back of form)

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IDAHO SECRETARY OF STATE

91/25/2006 05:00

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