CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE STATE OF IDAHO	
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of the business is:	
1. The assumed business name which the undersigned use(s) in the transaction of business is:	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Address	
<u>Name</u>	Complete Address
CRAIG L. GILES	3444 N 3700E HANSEN, IN 83334 3444 N 3700E HANSEN, IN 83334
EVYON GILES	3444 N 3700E HANSEN, IN 83334
3. The general type of business transacted under the assumed business name is: (mark only those that apply)	
☐ Retail Trade ☐ Manufactur☐ Wholesale Trade ☑ Agriculture☐ Services ☐ Construction☐	Finance, Insurance, and Real Estate
4. The name and address to which future Phone number (optional): correspondence should be addressed:	
CRAIG L. GILES 3444 N 3700E	Submit Certificate of Assumed Business Name and \$20.00 fee to:
HANSEN, ID 83334	Secretary of State 700 West Jefferson
 Name and address for this acknowledgme copy is (if other than # 4 above): 	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
į į	Secretary of State use only
	IDANO SECRETARY OF STATE
Signature:	12/31/1998 09:00 CK: 2940 CT: 108888 BH: 174622
Printed Name: CRAIG L. GILES	1 0 20.00 = 20.00 ASSUM NAME # 2
Capacity: Owner (see Instruction # 8 on back of form)	