## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2005 AUG 29 AN 10: 02

Please type or print legibly. NOTE: See instructions on reverse before filing. SECRETARY OF STATE STATE OF IDAHO

C&CS	Sutlery
2. The true name(s) and business address(es) business under the assumed business name	<b>:</b> :
Name	Complete Address
KINGA ENTERPRISES, INC.	2790 E. Black Canyon Highway
	Emmett, Idaho 83617
<u> </u>	
3. The general type of business transacted unde	er the assumed business name is:
<ul><li>✓ Retail Trade</li><li>✓ Transportation a</li><li>✓ Wholesale Trade</li><li>✓ Construction</li></ul>	and Public Utilities
Services Agriculture  Manufacturing Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and <b>\$25.00</b> fee to:
The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
KINGA ENTERPRISES, INC.	Basement West
	PO Box 83720 Boise ID 83720-0080
2790 E. Black Canyon Highway  Emmett, Idaho	208 334-2301
5. Name and address for this acknowledgment	Phone number (optional):
COPy is (if other than # 4 above).	
	Secretary of State use only
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(signature required) ted Name: Charles A. Lox	IDANO SECRETARY OF STAT
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