

Capacity/Title:

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.

Instructions are included on back of application.

¥ 4,		, į]	ţ	in i	§:	18
mur r	y- ,			,			

SEURITHRY OF STATE STATE OF ICAM)

 The assumed business name which the undersig business is: 	ned use(s) in the transaction of
FIVE STAR NA	TLS
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name V. Lizbeth Magallon T	Complete Address 2933 Rocky Road Burley, Idaho 83318
3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: Y. Lizbeth Magallon 2933 Rocky Road Burley, Idano, 83318	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
gnature: MWX N WARM .	Secretary of State use only
inted Name: V. Lizbeth Magallon	
apacity/Title: <u>UWhev</u>	IDANO SECRETARY OF STATE
inted Name:	@2/17/2012 05:00 CK: 1400 CT: 267110 BH: 1311070
	1 8 25.00 = 25.00 ASSUM NAME #

abn.pmd Rev. 07/2010

DI53407