

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

10 SEP -1 AH 8: 26

SECRETARY OF STATE STATE OF IDAHO

## Please type or print legibly. Instructions are included on back of application.

2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:  Name  Complete Address	
C163568	
. The general type of business transacted under the	
Retail Trade Transportation and	Public Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
I. The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street
GANNON SCHUTTE	PO Box 83720 Roise ID 83720-0080
1887 HIGLAND AVE #4	Boise ID 83720-0080 208 334-2301
TWIN FALLS ID 83301	
Name and address for this acknowledgment	
COPY is (if other than # 4 above).	
<del></del>	
	Secretary of State use only
nature:	
ted Name: GANNON SCHUTTE	
acity/Title: PRESIDENT	
nature:	
	TRANS RESERVED OF STATE
ted Name:	IDAHO SECRETARY OF STATE 09/01/2010 05:00