

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.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

2. The true name(s) and business a business under the assumed bus	address(es) of the entity or individual(s) doing
Name	Complete Address
Alue Miller	Leleles Main St.
	Bonners Ferry ID 83805
3. The general type of business trar	nsacted under the assumed business name is:
Wholesale Trade Cor	Pal Estate Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720
South Hill Pet Su P.O. Box 1256 Bonners Ferry, Id.	(208) 334-2301
7.0. BOX 1256	(208) 334-2301 85805

IDAHO SECRETARY OF STATE 10/15/2007 05:00 CK: 866 CT: 218544 BH: 1080411 1 0 25.00 = 25.00 ASSUM NAME # 2

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