## 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.

NOTE: See instructions on reverse before filing.

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<ol> <li>The assumed business name which the un business is:</li> </ol>	dersigned use(s) in the transaction of
Paradime Permit Service	
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name  Name  Lacey Rae Buchenen	of the entity or individual(s) doing ne:  Complete Address  29725 (eth st.  Athol ID 8380)
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction	der the assumed business name is:
Services	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  Paradime Dermit Service  29725 lo Th. St.  Athol ID 83801	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgmen copy is (if other than # 4 above):</li> </ol>	Phone number (optional):  (208) 683-3619 or 1-866-293-676
	Secretary of State use only
Signature: Signature required)	IDAHO SECRETARY OF STATE  1 / 01 / 2004 05 = 00  CK: 1732 CT: 158018 BH: 774168  1 @ 25.00 = 25.00 ASSUM NAME # 3
Printed Name: Lacey R Bushanan	IDAHO SECRETARY OF STATE  11/01/2004 05:00  CK: 1732 CT: 158018 BH: 774168
(see instruction # 8 on back of form)	1 @ 25.00 = 25.00 ASSUM NAME # 3