

Printed Name:

Capacity/Title:

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned MAR 18 AM 9: 10 submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

IDAHO SECRETARY OF STATE

03/18/2004 05:00

CK: 2124 CT: 158010 BH: 733881

1 0 25.00 = 25.00 ASSUM NAME # 2

<ol> <li>The assumed business name which the undersigned use(s) in the transaction of business is:</li></ol>	
3. The general type of business transacted under the assumed business name is:  Retail Trade Transportation and Public Utilities Wholesale Trade Agriculture Submit Certificate of	
<ul> <li>Manufacturing ☐ Mining</li> <li>Finance, Insurance, and Real Estate</li> <li>4. The name and address to which future correspondence should be addressed:</li> <li>LISA LUCAS</li> <li>ELO S. BLnd W.</li> <li>Mountain Howe, Td. 83647</li> </ul>	Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):  208-599-1676
Signature W. M. M. M. M. M. W. Signature & S. Signa	Secretary of State use only