## CERTIFICATE OF

ASSUMED BUSINESS NAME UN -9 PH 12: 17  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.	
1. The assumed business name which the undersibusiness is:  SILUCE NUCCETH ST  2. The true name(s) and business address(es) of the business under the assumed business name:  Name  Name  CHALL R CREY	nreptain ment
The general type of business transacted under the Retail Trade Transportation and My Wholesale Trade Construction Services Agriculture Manufacturing Mining  Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  MICHALL R. CORLEY  TO ROW N 51	
5. Name and address for this acknowledgment copy is (If other than # 4 above):  SAM C DROVE  1435 BROWN 57	Phone number (optional):  208. 783-170  Secretary of State use only
ignature: TO 8385	

Printed Name: MI ( HAS)

Capacity/Title: PQSS.DSm

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

06/09/2004 05:00

CK: 92072611618 CT: 150010 RH: 749523

1 0 25.00 = 25.00 ASSUM NAME # 2

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