

Capacity/Title: nur

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

.08 JUL -7 AM 9:55 SECRETARY OF STATE STATE OF IDAHO

 Please type or print legibly. NOTE: See instructions on reverse before filing.

business is:	
	entity or individual(s) doing Complete Address N 685 LU Lefont, 2D 83221
3. The general type of business transacted under the	
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	Submit Certificate of 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
 Name and address for this acknowledgment copy is (if other than # 4 above). 	Phone number (optional):
	Secretary of State use only
Signature: Lorrie A Surerus Signature Printed Name: Lorrie A Surerus	0123103

IDAHO SECRETARY OF STATE

67/67/2008 05:00

CK: 1671 CT: 158010 BH: 1125807

1 8 25.00 = 25.00 ASSUM NAME # 2