

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.

10 DEC 27 AM 8: 50

Please type or print legibly. Instructions are included on back of application.

SECRE -RY OF STATE

1. The assumed business name which the undersigne business is:	d use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the end business name: Name Leana Smith Sa	entity or individual(s) doing Complete Address 396 Road Ale ID 83860
3. The general type of business transacted under the Retail Trade Transportation and Pull Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: True U 119 39 G Road Sagle: ID 83860	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
Signature: Signature: Sund Smith Capacity/Title: Owner Signature:	Secretary of State use only
Printed Name: Capacity/Title:	IDAHO SECRETARY OF STATE 12/27/2010 05:00 CK: 1017 CT: 253778 DH: 1252411 18 25.89 = 25.89 ASSUM NAME # 2

abn.pmd Rev. 07/2010

