

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.

2002 JUL 17 AM 8: 57

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

Please type of proverse before filing.	LANCE OF ATE
NOTE: See instructions on reverse before filing.	SEALETING OF STATE
	STATE DE DAHON of
the undersigned us	e(s) in the transaction of
The assumed business name which the undersigned us	
business is:	
Chug's Handuneko	
While & Handull	
S. C. L. and ith	or individual(s) doing
and business address(es) of the entity	Of Itial vicasi(=)
The true name(s) and <u>business</u> address(es) of the entity business under the assumed business name:	
business under the assumed business under the assumed business (Complete Address
Name / Z	110
1. 1. 2. 7 1 to a like Y. 1. 1/2	10
Maran de Marant	4 cld 83/0/5
This contract of	
	•
3. The general type of business transacted under the ass	sumed business name is:
2. The general type of business transacted under the ass	, and the second
3. The general type of business than	Litilities
Transportation and Public	2 Offlitties
Wholesale Trade Construction	l a mari su'
	Submit Certificate of
Zi Services	Assumed Business
Manufacturing Mining	Name and \$20.00 fee to:
Deal Estate	Traine and
Finance, Insurance, and Real Estate	Secretary of State
4. The name and address to which future	700 West Jefferson
4. The name and address to which read	700 West Jenerson
correspondence should be addressed:	Basement West
	PO Box 83720
	Boise ID 83720-0080
	208 334-2301
	200 00
	Phone number (optional):
Name and address for this acknowledgment	
5. Name and address for this destroy.	201.325 8815
copy is (if other than # 4 above).	
7 0 R h	
1. Ven R	Secretary of State use only
me of Morand Street	
905 11 11 00/22	
VIMALL UN STADO	and the second s
da :	•
Signature:	
Signature: Signature: Night of the State of	IDAHO SECRETARY OF STATE
Printed Name: Willed In 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CV. 2079 CT: 15A918 RM: 477541
	1 8 28.00 = 20.00 ASSUM NAME # 2
1 (ADDAVIT)	
(see instruction #8 on back of form)	D66557