227		
CERTIFICATE C	DF	FILED EFFECTIVE
ASSUMED BUSINES	SS NAME	
Pursuant to Section 53-504, Idaho Cod		
submits for filing a certificate of Assume		
Please type or print legibly NOTE: See instructions on reverse b		STATE OF TRAHO
1. The assumed business name which the	undersigned	use(s) in the transaction of
business is: KINZ ZONE		
NUZ ZONL		
2. The true name(s) and business address		tity or individual(s) doing
business under the assumed business r Name	name:	Complete Address
	<u>775</u>	Complete Address Dalton Avenue #A
		d'Alene, ID
		x38/5
	<u></u>	
3. The general type of business transacted	d under the as	sumed business name is:
Retail Trade Transportation and Public Utilities		
Wholesale Trade Construction	on	
Services Agriculture	e	Submit Certificate of
Manufacturing Mining		Assumed Business Name and \$25.00 fee to:
☐ Finance, Insurance, and Real Esta	ate	
4. The name and address to which future		Secretary of State 700 West Jefferson
correspondence should be addressed:		Basement West
Same as above	-	PO Box 83720 Boise ID 83720-0080
	-	208 334-2301
	B	
5. Name and address for this acknowledg	gment	Phone number (optional):
COPY IS (if other than # 4 above):		208-762-9941
	-	Secretary of State use only
/	purp65	
Signature:	forms\at	
Printed Name: Iracy West	g.tcorpfformstabn formstabn.p65 Ransed 04/2003	IDANO SECRETARY OF STATE 09/18/2003 05:00
Capacity/Title:	xorp∜forr Rev	CK: 123964512 CT: 156810 BH: 7822 1 8 25.86 = 25.96 ASSIM MARE #
(see instruction # 8 on back of form)	- <u>9</u> :6	
		- 10/11
		D 68967