

Capacity: Owner

(see instruction #8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

	`	and the second second
27		FILE
N	CERTIFICATE OF ASSUMED BUSINESS N Pursuant to Section 53-504, Idaho Code, the un submits for filing a certificate of Assumed Busine Please type or print legibly. OTE: See instructions on reverse before fi	ess Name.
	assumed business name which the undersness is:	signed use(s) in the transaction of
busir		Complete Address 42 East James Court DR. Meridian Id 83642
3. The (Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
	name and address to which future espondence should be addressed: 42 East James Court Dr. Meridian Id 83642	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	ne and address for this acknowledgment y is (if other than # 4 above):	Phone number (optional): 208 724 548)
	J J J J J J J J J J J J J J J J J J J	Secretary of State use only
8ignature:∠ Printed Nam	ne: Charles Fanging	IDAHO SECRETARY OF STATE 08/21/2001 05:00 CK: 1049 CT: 150313 BH: 414743 1 0 20.00 = 20.00 ASSUM MANE # 2

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