227				FIL	<b>&gt;</b>
	CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse)  To the SECRETARY OF STATE, STATE OF IDAHO  Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.				
	1.	The assumed business name which the unbusiness is:			'' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
		Country Wicks		r	
	2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:			
		Name Jacoby Sneddon	153 Nor	Com th 100	<u>Dlete Address</u> West, Rupert Id 83350
	3.	The general type of business transacted un (mark only those that apply)	der the	assum	ed business name is:
		Retail Trade			sportation and Public Utilities nce, Insurance, and Real Estate
	4.	The name and address to which future correspondence should be addressed:  Jacoby Sneddon			
		153 North 100 West			Submit Certificate of Assumed Business
		Rupert Id 83350			Name and \$20.00 fee to:
	5.	Name and address for this acknowledgmen copy is (if other than # 4 above):	t		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
			IDANO SECRETARY OF STATE Secretary of State use only 2 05/25/2001 09:00		
1 700-b 1 0 1			CK: 014532 CT: 146834 BH: 399249  1 0 20.00 = 20.00 ASSUM NAME N 2		
	gnatu		Re	•	2
		Name: Jacoby Sneddon	gwd uger		174558
	.paci	ty: owner (see instruction # 8 on back of form)	) tcorpVormsNaton pm6		