

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.

s for filing a certificate of Assumed Business Nam Please type or print legibly.

NOTE: See instructions on reverse before filing.

08 AUG -6 AM 8: 38

SECRETARY OF STATE STATE OF IDAHO

business is: B and I FARA	
The true name(s) and business address(es) of the	ne entity or individual(s) doing
business under the assumed business name:	
Name	Complete Address
JOANN Deloach 5	40 Amber DR.
Charles D. Deloach M	11 Home, ID 83647
The general type of business transacted under t	he assumed business name is:
Retail Trade Transportation and	l Public Utilities
This is the second of the seco	
	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
correspondence should be addressed.	Basement West
JOANN Deloach	PO Box 83720
540 Amber DR.	Boise ID 83720-0080
	208 334-2301
M/w Home, ID 83647	
. Name and address for this acknowledgment	Phone number (optional):
COPY IS (If other than # 4 above):	208-587-3176
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Same	Sacretary of State use only
	Officially of Other and Arth
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(algredure sequired)	TO STATE
ed Name: <u>Jo Ann Deloach</u> adty/Tille: <u>Owner</u>	IDAHO SECRETARY OF STATE 08/06/2008 05:0 08:181 CT: 228564 BH: 11384

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