

Capacity/Title: owner

(see instruction # 8 on back of form)

## **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. 2005 MAR 13 PM 1: 20

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

SECRETAS: 1.5 STATE STATE OF S

1. The assumed business name which the und business is:	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name  Name  Dean + Magan Whitney	e: Complete Address
3. The general type of business transacted un-	der the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  50 ~ e a 5 above	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	Phone number (optional): $(208)683-2161$
Signature: Den Thikey	Secretary of State use only    100
Printed Name: Dean Witney	IDAHO SECRETARY OF STATE  23/13/2006 05:00  CK: 1441 CT: 158010 BH: 942914  25 18 25.00 = 25.00 ASSUM NAME # 2