

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

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



1. The assumed business name which the undersi business is:	
2. The true name(s) and business address(es) of to business under the assumed business name: Name Nicholas P, Wylie 10 Bo	Complete Address W. Lone Wolf Ln. Dise, ID, 83704-5311
3. The general type of business transacted under to Retail Trade Transportation and Wholesale Trade Construction - #V/	Public Utilities
Services - AC Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Nicholas P. Wylie 10430 W. Lone Wolf Ln. Boise, ID. 83704-5311	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): (208) 344-37/9
	Secretary of State use only
ignature: Micholas P. Nylie rinted Name: Nicholas P. Wylie apacity/Title: Owner	D167496
rinted Name: Nicholas P. Wylie	IDAHO SECRETARY OF STATE 01/24/2007 05:0 1
apacity/Title: OWNER \$\frac{1}{8} \text{ (see instruction # 8 on back of form)}	CK: 479 CT: 158010 BH: 10284 1 0 25.00 = 25.00 ASSUM MAME