## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on payers)

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.	gives notice of adoption of an Ass.  The assumed business name which the under business is:	e a company of the co
2.	The true name(s) and business address(es)	of the entity or individual(s) doing
	business under the assumed business name  Name	is/are: Complete Address
	Cenieve Lynn Leme 10	117 Longmont Ave. #3, Baise, 10 8370
3.	The general type of business transacted und	er the assumed business name is:
	□ Retail Trade       □ Manufacturing         □ Wholesale Trade       □ Agriculture         □ Services       □ Construction	☐ Transportation and Public Utilities ☐ Finance, Insurance, and Real Estate ☐ Mining
4.	The name and address to which future correspondence should be addressed:	
	Ganleve Lynn Lem 9 1017 Langmont Ave. #3	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		Secretary of State use only  EDAHO SECRETARY OF STATE
ianatı	ure: Joneve Limn. Hemo	10/06/1998 09:00 CK: 361 CT: 184983 BH: 151361 .
	d Name: Ganieve Lynn Leme	1 @ 20.00 = 20.00 ASSUM NAME # 2
	eity: President	Diggs7

(see instruction # 8 on back of form)