



CERTIFICATE OF ASSUMED BUSINESS NAME FILED

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

01 MAY -7 AM 9:10

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

SEW-N-SO

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
<u>Daniel Martinez</u>	<u>8496 Blue Hill Ln, Boise, ID. 83716</u>
<u>Charmaine Martinez</u>	<u>8496 Blue Hill Ln, Boise, ID. 83716</u>

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

SEW-N-SO
P.O. Box 170301
Boise, ID. 83716

Phone number (optional):

(208) 440-4839

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature: Daniel Martinez

Printed Name: Daniel Martinez

Capacity: Owner

(see instruction # 8 on back of form)

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Secretary of State use only

IDAHO SECRETARY OF STATE

05/07/2001 09:00

CK: 1439 CT: 146020 BI: 395501

1 @ 20.00 = 20.00 ASSUM NAME # 2

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