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## CERTIFICATE OF ASSUMED BUSINESS NAME

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

OI SEP 14 AN IO: 06
SECKLIANT UT STATE
STATE OF IDAHO

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

<ol> <li>The assumed business name which the ubusiness is:</li> </ol>	undersigned use(s) in the transaction of
Glover's G	
2. The true name(s) and business address(e business under the assumed business name Name  Deborah S. Glover	es) of the entity or individual(s) doing ne:  Complete Address  1420 N Midland Blvd Nampa
Tom Glover	1420 N. Midland Blvd., Nampa, ID 83651
The general type of business transacted up	nder the assumed business name is:
در الله الله الله الله الله الله الله الل	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
Signature:	Secretary of State use only  IDAHO SECRETARY OF STATE  99/14/2001 05:00  CK: CASH CT: 151250 BH: 419010  1 0 26.00 = 20.00 ASSUM NAME # 2