

Printed Name: 100

(see instruction # 8 on back of form)

Capacity/Title:__

CERTIFICATE OF

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersignal APR 29 161 8: 42

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

STATE OF WAHU

1.	The assumed business name which the undersigne business is: Mallko Avts	d use(s) in the transaction of
2.	The true name(s) and business address(es) of the elements business under the assumed business name: Name Mark W. Schutter For Boys Carri D Schutter Boys	entity or individual(s) doing Complete Address Box 19014 Se Td 83019-014
3 .	The general type of business transacted under the an analysis of the second sec	
	correspondence should be addressed: Howk Schutter How No Decthorn Ave Kung To 83634 Name and address for this acknowledgment copy is (if other than # 4 above):	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
	Sopy to (it other train # 4 above).	Secretary of State use only

IDAHO SECRETARY OF STATE

04/29/2005 05:00

CK: 4128 CT: 158010 BH: 807555

1 8 25.00 = 25.00 ASSUM NAME # 2

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