

CERTIFICATE OF ASSUMED BUSINESS NAME

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

AACG/G#80%1:

2007 AUG 28 PH 2: 18

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filir	•
The assumed business name which the undersign business is: The G & D C	
The true name(s) and business address(es) of the business under the assumed business name:	he entity or individual(s) doing Complete Address 632 Hydra Place # B Post Falls, ID 83854
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Wholesale Trade Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Danielle J M Kinney 632 Hydra Place # B Post Falls, ID 83854 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: (signature required) Printed Name: Danielle J M Kinney Capacity/Title: Owner (see instruction # 8 on back of form)	Secretary of State use only IDAHO SECRETARY OF STATE OB/28/2007 05:00 CK: 1260793 CT: 172099 BH: 10730 1 @ 25.00 = 25.00 ASSUM NAME (