Printed Name: 📝

Capacity/Title: LuneR

(see instruction #8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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

FILED EFFECTIVE

2005 APR 21 AM 9: 06

STATE OF IDAHO

The true name(s) and business addres business under the assumed business	ss(es) of the entity or individual(s) doing name:
Name	Complete Address
Ruhard L. Stater	_ MIGALLEGE E.
from	1-76. Dox 1155 Smalley Jakes 53276
	Problemain 57276
Manufacturing Mining Finance, Insurance, and Real Est The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720
26 36 × 459 Shale 2 53476	208 334-2301
Name and address for this acknowled copy is (if other than # 4 above):	 -

IDAHO SECRETARY OF STATE

94/21/2005 05:00

CK: 5019 CT: 158010 RH: 885906
1 25.00 = 25.00 ASSUM NAME # 2