

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILE: EFFECTIVE

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

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Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

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1. The assumed business name which the ur business is:	ndersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es business under the assumed business nar <u>Name</u>	ne:
<u></u>	Complete Address
Jeffery Hollenbeck	4415 FREEMONT ST
TO THE HOLLEW DE CK	Buise 10 83706
3. The general type of business transacted under the services and Real Estate  4. The name and address to which future correspondence should be addressed:  4. The name and address to which future correspondence should be addressed:  4. The name and address to which future correspondence should be addressed:  4. The name and address to which future correspondence should be addressed:	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
5. Name and address for this acknowledgme copy is (if other than #4 above):  AIFREDO DE LA CRUZ	Phone number (optional):  208 283-4784
"Same AS ABove"	Secretary of State use only
Signature: J. Hollenbeck  Printed Name: Jeffery Hollenbeck  Capacity/Title: Colowners	IDANG SECRETARY OF STATE  (28/03/2005 05:00  CK: 586181 CT: 172099 RH; 824814  1 9 25.00 = 25.00 ASSUN NAME # 2