## FILED EFFECTIVE



## CERTIFICATE OF ASSUMED BUSINESS NAME

06 FEB 27 PM 3: 20

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

SECRETARY OF STATE STATE OF IDAHO

96896

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

The assumed business name which the undersity business is:  THE ASSUMED THE PROPERTY OF THE P	gned use(s) in the transaction of
2. The true name(s) and business address(es) of business under the assumed business name:  Name  Tekulan M. Haffman	Complete Address  Stat Blud
3. The general type of business transacted under  Retail Trade  Transportation an	
<ul> <li>Wholesale Trade</li></ul>	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West
SAME	PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgment copy is (if other than # 4 above).</li> </ol>	Phone number (optional): (208)70340せて
	Secretary of State use only
Signature:  Printed Name:  Capacity/Title:  (see instruction # 8 on back of form)	1DAHO SECRETARY OF STATE   1DAHO SECRETARY OF STATE   102/27/2006 05 = 00