

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

	ري	-
Ç.	? (	Ç
AE	ń	רב
	5	Œ
유	$\overline{\mathbb{D}}$	9
	,	•
DAY:	$\mathcal{L}_{i}$	<b>X</b>
王	2	9
-	$\mathbf{E}$	ф
r	7	24
		4-

NOTE: See instructions on reverse before filing.	HO HO SI 9:		
1. The assumed business name which the undersigned use(s) in the transaction of business is:  Eye CA+chees			
2. The true name(s) and <u>business</u> address(es) of the elements	ntity or individual(s) doing  Complete Address  MISSOLA Way  LUCU IN PRANCE		
3. The general type of business transacted under the a Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  (SAML) 1003 MISSALA WAY  CILCUIT 10 83005			
Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): (208) 980-9375		
Garal I Langilla	Secretary of State use only		

Signature:

Printed Name:

Capacity/Title:

(see instruction # 8 on back of form)

g:\corp\forms\abn lorms Revised 01/2001

D62625