## **CERTIFICATE OF ASSUMED BUSINESS NAME**

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2007 FFB 26 AM 9: 21

FILED EFFECTIVE

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

(see instruction # 8 on back of form)

Dic	GiGals
The true name(s) and business address(es business under the assumed business nam Name     Saundra L Shackelford	•
3. The general type of business transacted un  Retail Trade Transportation  Wholesale Trade Construction	nder the assumed business name is:
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
The name and address to which future correspondence should be addressed:     Saundra L Shackelford	Secretary of State 700 West Jefferson Basement West PO Box 83720
4950 Elmore Road Fruitland, ID 83619	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent Phone number (optional): $308-452-5377$
Legalzoom.com, Inc. c/o Daniela Balan 7083 Hollywood Blvd. Suite 180	Secretary of State use only
ignature: X (signature required)	IDAHO SECRETARY OF STATE  22/26/2007 05:2  CK: 33510 CT: 168878 BH: 183
rinted Name: Saundra L Shackelford Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  ### ### ### ### ### ################