FILED EFFECTIVE

2005/10 3/ 01 3/9



Capacity/Title: <u>UWNE</u>Y

(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.

Address Box 8 Malta, Idaho8334 Malta, Idaho 83342 siness name is: Certificate of d Business and \$25.00 fee to:
Box 8 Malta, Idaho8334 Malta, Idaho 83342 siness name is: Certificate of d Business and \$25.00 fee to:
Siness name is: Certificate of d Business and \$25.00 fee to:
Certificate of d Business and \$25.00 fee to:
Certificate of d Business and \$25.00 fee to:
st Jefferson ent West 83720 9 83720-0080 -2301
umber (optional): 8-431-3919
cretary of State use only

IDAHO SECRETARY OF STATE 95/31/2005 95:00 CK: 1268 CT: 158010 BH: 813283 1 0 25.00 = 25.00 ASSUM NAME # 2

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