CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse FILED

To the SECRETARY OF STATE, STATE OF IDAHO
Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of	
business is:	ELGREIALD CHISTATE STATE OF IDAHO
The true name(s) and business address(es) of the er business under the assumed business name is/are:	ntity or individual(s) doing Complete Address 15t Street South Nampa 33651
The general type of business transacted under the a (mark only those that apply)	ssumed business name is:
☐ Retail Trade ☐ Manufacturing ☐ ☐ Wholesale Trade ☐ Agriculture ☐ ☐ Services ☐ Construction ☐	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4. The name and address to which future Phone nur correspondence should be addressed:	mber (optional): (308) 733-5310
Trent Accounting PC BCX WW8	Submit Certificate of Assumed Business Name and \$20.00 fee to:
Parma ID 98660 5. Name and address for this acknowledgment copy is (if other than # 4 above): Charlie Vidriezea	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
1512 1st Street South	Secretary of State use only
mampa ID 831051 gnature: Obliblio Vidiy o	IDANO SECREJARY OF STATE 01/22/1999 09:00 CK: 1133 CT: 119865 BH: 181966
inted Name: <u>abdulia Vidriazea</u>	1 8 28.80 = 28.80 ASSUM NAME # 2 22481
apacity: (see instruction # 8 on back of form)	1