

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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SECRETARY OF STATE STATE OF IDA O

Please type or print legibly.

NOTE: .See instructions on reverse before filing.

The Bernan Corne) daing		<u></u>
**business under the assumed business nam Name	me:				
					:
Heidi Woods	374	Wayne	Do 4	En	83201
Engly Woods	374	wayne	Por		_8320
3. The general type of business transacted unc	der the ass	sumed business	Pocata name is:	llo	
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Heid: Woods 250 NSTA Swit A Pocatulo Name and address for this acknowledgmen copy is (if other than # 4 above):		Submit Certifica Assumed Busine Name and \$25.0 Idaho Secretary o 450 N 4th Street PO Box 83720 Boise ID 83720-00 (208) 334-2301	ess 00 fee to: f State		
gnature: <u>Hish Woods</u> inted Name: Heidi woods	grkorpt/form stabn formstabn.p85 Revised 04/2003	Secretary of S	itate use only	TARY OF	1

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