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CERTIFICATE OF ASSUMED BUSINESS NO (Please type or print legibly. See instructions on reversion to the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersidated of the section of th	
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned of Description of an Assumed Business Name.	FEC VE
1. The assumed business name which the undersigned use(s) in the transaction of business is: Center Center	<u>2</u>
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address Carroly Hansen Cheurolet Tric C 77670 1654 Blue Lakes Blue Twin Falls ID 8330	<u></u>
3. The general type of business transacted under the assumed business name is: (mark only those that apply)	
Retail Trade][
Pandy Hansen Import Center 1310 Pole line Poacl East Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise 1D 83720-0080 208 334-2301	
Secretary of State use only	<u></u> U
Capacity: President 19 20.00 = 20.00 ASSI	9 = 00 379548
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