

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.

06 MAY 30 AM 9: 50

SECRETAL OF STATE STATE OF IDAHO

The assumed business name which the under business is: Kips Clean Cut	ersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name Name Kiphe Fuhciman	: <u>Complete Address</u>
3. The general type of business transacted und Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Kiplan F. Fuhciman 3075 N. Kimball 3075	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature:	Secretary of State use only 99druges 8002
Printed Name: Kiplan E Fuhriman Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 95/30/2006 05 = 00 CK: 1277 CT: 158810 BH: 957167 1 0 25.80 = 25.80 ASSUM NAME 1 2