	FILER
CERTIFICATE OF	IL MAR -3 AM 8: 46
ASSUMED BUSINESS N	NAME 11 MAR -3 AM 8:46
Pursuant to Section 53-504, Idaho Code, the un submits for filing a certificate of Assumed Busin	ndersigned bess Name
<u>Please type or print legibly.</u> Instructions are included on back of applications	ation. SECREE BY OF STATE STATE OF IDAHO
 The assumed business name which the under business is: 	signed use(s) in the transaction of
MAGARI	
The true name(s) and <u>business</u> address(es) o business under the assumed business name:	-
Name	Complete Address
MAKSIM B SHIVA	625 BESTAUE
	CDA1D 83815
 Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: <u>MAKSIM SHIVA</u> <u>924 E. GUISERT</u> <u>CDA ID \$3ELS</u> Name and address for this acknowledgment 	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
COPY IS (if other than # 4 above):	Secretary of State use only
Printed Name: <u>MAKSIM SHIVA</u>	
Capacity/Title:	
Signature:	IDANO SECRETARY OF STATE
Printed Name:	03/03/2011 05:00 CK: 1010 CT: 158018 BH: 1262446 1 0 25.08 = 25.00 ASSUM NAME # 2
Capacity/Title:	
abn.pmd Rev. 07/2010	D145694

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