

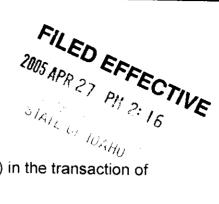
Capacity/Title: Owner

(see instruction # 8 on back of form)

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.



D87225

2. The true name(s) and business address(e)	
business under the	es) of the entity or individual(s) doing
business under the assumed business na Name	
35A-614, LLC	Complete Address
W21330	2691 W. Cessna Avenue, Hayden, ID 838
	on and Public Utilities
Wholesale Trade Construction	1
X Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
35A-614, LLC	Basement West PO Box 83720
2691 W. Cessna Avenue	Boise ID 83720-0080
Hayden, ID 83835	208 334-2301
5. Name and address for this acknowledgm	ent Phone number (optional):
COpy is (if other than # 4 above).	208.762.0774
same	200.702.0774
	Secretary of State use only
	: 18
nature:	IDAHO SECRETARY OF STATE 94/27/2005 05:00 CK: 1494 CT: 158010 BH: 807097 1 0 25.00 = 25.00 ASSUM NAME #