

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name: 19 4411: 26

Please type or print legibly. NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

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NOTE. See instructions on reverse before	STATE OF IDAHO
The assumed business name which the under business is:	rsigned 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  Caluin George  Jennifer Goung  3. The general type of business transacted under	Complete Address  25 90 N Eagle Rd Merid  8 90 N Eagle Rd Merid  Td 83 ley2
Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):  888-430
	Secretary of State use only
Signature: Signature: Signature of the S	IDAHO SECRETARY OF STATE  Sevised 09/2003 05:00  CK: 1292 CT: 158010 BH: 669590  1 9 20.00 = 20.00 ASSUM NAME # 2