

CERTIFICATE OF ASSUMED BUSINESS NAME

EILED EFFECTIVE

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.

business is: Speak Both_Handed The true name(s) and business address(es)	
business under the assumed business name	e: Complete Address
	12078 Cloverwood In. # 202
	Boise ID 83713
Wholesale Trade Construction Services Agriculture Manufacturing Mining	Submit Certificate of Assumed Business Name and \$20.00 fee to:
_ ,	
correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
The name and address to which future correspondence should be addressed:	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
The name and address to which future correspondence should be addressed: Connie K. Blain 12078 Cloverwood In. #202 Boise ID 83713 Name and address for this acknowledgme	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301

Signature: Connie K. Printed Name: Connie K. B. Capacity/Title: owner (see instruction #8 on back of form)

IDAHO SECRETARY OF STATE 62/21/2003 05:00 CK: 1046 CT: 158010 BH: 664333 1 2 20.00 = 20.00 ASSUM NAME # 2