227



CERTIFICATE OF ASSUMED BUSINESS NAME

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

Capacity/Title: Dures / Harring ex

(see instruction # 8 on back of form)

business is:	s) of the entity or individual(s) doing ne:
Name Leticio Valles Francisco Aguirre Mario Aguirre	2096 Kimberly Rd Twin falls 2096 Kimberly Rd Twin falls 837,0
	nder the assumed business name is:
 Wholesale Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to:
 The name and address to which future correspondence should be addressed: 	Secretary of State 700 West Jefferson Basement West PO Box 83720
Leticia Aquino de Valles 488 Wisemanst Hansen ID 83334	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than #4 above):	ent Phone number (optional):
Francisco Aguirre 4/14 E 2400 N Hansen ID 83334 mature: Stein Ralla	Secretary of State use only Secretary of State use only IDANO SECRETARY OF STATE

IDAHD SECRETARY OF @3/16/2010 CK: 1463 CT: 245962 B @ 25.00 = 25.00 AS

D137716