## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned

ness Name.
se(s) in the transaction of
mplete Address m 10 83702
med business name is:
ansportation and Public Utilities ance, Insurance, and Real Estate ning
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
Secretary of State use only IDAHO SECRETARY OF STATE
02/08/1999 09:00 CK: 5576 CT: 118823 BH: 186888
1 8 28.86 = 28.88 ASSUM NAME # 2
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