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CERTIFICATE ( ASSUMED BUSINE Pursuant to Section 53-504, Idaho Coo submits for filing a certificate of Assum Please type or print legibly NOTE: See instructions on reverse bu	SS NAME de, the undersigned ed Business Name c efore filing.
1. The assumed business name which the business is: )aura]; [1, 5]	
2. The true name(s) and business address(e business under the assumed business na Name <u>Diff Buy d</u> <u>Mike Paryd</u>	es) of the entity or individual(s) doing ime: Complete Address <u>1&gt;20 E. 17tt. T.F. T.d. 83404</u> <u>1&gt;20 E. 17tt. T.F. T.d. 83404</u>
3. The general type of business transacted ur	nder the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: <u>Jele Beyd</u> (BiggSure regional) Printed Name: <u>Jell Beyd</u> Capacity/Title: <u>CLONEC</u> (see instruction # 8 on back of form)	Secretary of State use only IDAHO SECRETARY OF STATE 01/06/2005 05:00 CK: 7777 CT: 158010 RH: 785654 1 & 25.00 = 25.00 ASSUM MARE # 2