



**CERTIFICATE OF
ASSUMED BUSINESS NAME**

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

NOTE: See instructions on reverse before filing.

2003 APR 14 PM 2:34

DEPARTMENT OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

PR DATE WBS

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name
Max Robbins

Complete Address
555A River Rd
Bliss ID 83314

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

4. The name and address to which future correspondence should be addressed:

555 A River Rd
Bliss ID 83314

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):

Signature:

Signature: Patricia Babbins (Signature required)

Capacity/Title: Principle

(see instruction # 8 on back of form)

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Revised 03/2002

Secretary of State use only

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IDaho SECRETARY OF STATE
04/18/2003 05:00
CK: 1013 CT: 158010 BH: 675526
1 B 25.00 = 25.00 ASSUM NAME # 2