

Printed Name:

Capacity/Title:_

Owner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned 09 AUG -7 PM 1: 49 submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE STATE OF IDAHO

IDAHO SECRETARY OF STATE

08/07/2009 05:00

CK: 4351 CT: 158818 BH: 1182868

B 25.68 = 25.88 ASSUM MANE N

Please type or print legibly. NOTE: See instructions on reverse before filing.

Crant Vanderhunden 36	Complete Address
	exidian, ID 8364
The general type of business transacted under the Retail Trade Transportation and Pu Wholesale Trade Construction	
 Wholesale Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Crant Vander Linden	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
H35 3621 So. Basiliez Way Meridian, ID 83642	200 334-2301