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CERTIFICATE OF	FILED/EFFECTIVE
ASSUMED BUSINESS NAM	ME EFFECTIVE
Pursuant to Section 53-504, Idaho Code, the unders submits for filing a certificate of Assumed Business I	
Please type or print legibly. NOTE: See instructions on reverse before filing	STATE OF IDAHO
1. The assumed business name which the undersign business is:	
2. The true name(s) and <u>business</u> address(es) of the e business under the assumed business name: <u>Name</u> <u>Juby Congrove</u> <u>P.O.</u>	entity or individual(s) doing <u>Complete Address</u> <u>Box 835 Ontario OR 9</u> 7914
 3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction 	
 Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: <u>Juby Congrove</u> <u>P.O. Box 835</u> <u>Ontavio OR 97914</u> 	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): <u>Juby Congrove</u> <u>1356 Poen Rd</u> <u>Kuna ID 83634</u>	Phone number (optional): <u>208 - 230 - 2710</u> Secretary of State use only
Signature: <u>Judy Congrove</u> Printed Name: <u>Judy Congrove</u> Capacity: <u>OWNER</u> (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 07/13/20001 055:000 CK: 218 CT: 148783 BH: 487719 1 0 20.00 = 20.00 ASSUM NAME # D 46789