

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

- - 8

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

(see instruction #8 on back of form)

Please type or print legibly. NOTE: See instructions on reverse before	STATE OF IDAHO (日本) 3
The assumed business name which the under business is: HILLVIEW SINCLAIR	ersigned use(s) in the transaction of
	of the entity or individual(s) doing Complete Address PO BOX ● 146 , RIRIE ID 83443 PO BOX 146 RIRIE IO 83443
3. The general type of business transacted und Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	er the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$20.00 fee to:
 4. The name and address to which future correspondence should be addressed: 	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
COPY is (if other than # 4 above):	Secretary of State use only
Signature: Steven followson Printed Name: STEVEN JOHNSON	IDAHO SECRETARY OF STATE 100
Printed Name: STEVEN JOHNSON	IDAHO SECRETARY OF STATE 95/30/2003 95:00 CX: 1273 CT: 158010 BH: 683337 1 6 25.96 = 25.96 ASSUM HAME # 2
Capacity:	1 t 23.86 = 25.86 ASSUM NAME # 2

D 65850