FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504. Idaho Code the undersigned

Pursuant to Section 53-504, Idano Code, the ul submits for filing a certificate of Assumed Busin	ess Name. SEURLIAL OF IDAHO
Please type or print legibly. NOTE: See instructions on reverse before fl	
The assumed business name which the undersolution business is: K N G 1 ft 5	signed use(s) in the transaction of
2. The true name(s) and business address(es) of business under the assumed business name: Name Kari Mortimer John Mortimer	the entity or individual(s) doing Complete Address 45 E 2md N St Anthony, Td 83445
3. The general type of business transacted under Retail Trade Transportation are Wholesale Trade Construction	i
ServicesManufacturingMiningFinance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: NGFTS 75 E 2nd N 55 Anthony I d 83445	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): <u>ਹਾਲ ਫਰੇਪ-/ਕ78</u>
	Secretary of State use only
Signature: Kau Manual Printed Name: Kari Montimer Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE O2/15/2006 05=00 CK: 728505 CT: 172099 BH: 937998 1 0 25.00 = 25.00 ASSUM NAME # 2

