

Capacity/Title: Number

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

10 JUN -1 AM 9: 18

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

SECRETARY OF STATE STATE OF IDAHO

	ne entity or individual(s) doing Complete Address 19 Curley Dr. Swite 9
3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	
5. Name and address for this acknowledgment copy is (if other than # 4 above): Signature: (signature required) Printed Name: Ron Baker	IDAHO SECRETARY OF STATE ### 1674 CT: 242898 BH: 1224643 1 8 25.88 = 25.88 ASSIM MANE 1 2

D 139712