CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

	(i loade type of print logicity).	
200	To the SECRETARY OF STATE, STATE OF Pursuant to Section 53-504, Idaho Cod gives notice of adoption of an Assumed	e, the undersigned Business Name
1.	The assumed business name which the undersign	ned use(s) in the transaction of
	business is:	
	Checks 3 Balances	
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	Name Name	Complete Address
	Kimburly A. Audens 4916	Camas
	Boisi	Jd 83705
3.	The general type of business transacted under the (mark only those that apply)	e assumed business name is:
	Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4.	The name and address to which future Phone r correspondence should be addressed:	number (optional):
	Checks 3 Balances	Submit Certificate of
	10.11	Assumed Business
	4916 Camas	Name and \$20.00 fee to:
	Boise Id 83705	Secretary of State
		700 West Jefferson
5 .	Name and address for this acknowledgment	Basement West
	COPY is (if other than # 4 above):	PO Box 83720
		Boise ID 83720-0080 208 334-2301
	8	Secretary of State use only IDAHO SECRETARY OF STATE
		07/25/2000 09:00
	į į	

Signature:

Capacity:_

Printed Name:

(see instruction # 8 on back of form)

CK: 2103 Cf: 133934 BH: 336023

1 # 20.80 = 20.00 ASSUN NAME # 2

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