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CERTIFICATE OF ASSUMED BUSINESS NAM	
Pursuant to Section 53-504, Idaho Code, the unders submits for filing a certificate of Assumed Business I <u>Please type or print legibly.</u>	Name. 06 AUG 31 PN 1-16
NOTE: See instructions on reverse before filing 1. The assumed business name which the undersign	STATE OF IDAHO
LUOFY Elephanter E	
 The true name(s) and <u>business</u> address(es) of the business under the assumed business name: 	
Name Mark David Welker 230	Complete Address 837.5 DS ONG St Boise ID
	os ONE St. Boise ID B3
3. The general type of business transacted under the assumed business name is:	
	Submit Certificate of Assumed Business Name and \$25.00 fee to;
4. The name and address to which future correspondence should be addressed: $\frac{Malk}{2305} Owc St$	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): 208 405 407
	Secretary of State use only
Signature: <u>Math</u> <u>David Uklker</u> (signature required) Printed Name: <u>Math</u> <u>David Uklker</u> Capacity/Title: <u>Phesident</u>	IDAHO SECRETARY OF STATE 08/31/2006 05=00 CK: 1517 CT: 203962 BH: 973066 1 25.08 = 25.00 ASSUM NAME # 2
(see instruction # 8 on back of form)	D 10 3318