Capacity: OWNER

(see instruction # 8 on back of form)

	CERTIFICATE OF ASSUM (Please type or print legibly. Se		
To the SECRETARY OF STATE, STATE OF IDAHO  Pursuant to Section 53-504, Idaho Code, the undersigned 12 22 PH • 10  gives notice of adoption of an Assumed Business Name.			
1.	The assumed business name which the und business is: The Main ON	lersigned use	e(s) in the transaction of STOV
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	JONATH ON Granning 5	590 F	nplete Address 9.3607 E.a.r.I RD cc/DWcII
	HOME ADDRESS: 1	10 Alb	GUY ST Shreveron
		7/105	
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)		
	Retail Trade  Manufacturing  Agriculture  Services  Construction		nsportation and Public Utilities ance, Insurance, and Real Estate ing
4.	The name and address to which future correspondence should be addressed:		
	590 PEarl RD Caldwell ID 836	07	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	<b>t</b>	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		8	Secretary of State use only
		Revision 1/96	IDAHO SECRETARY OF STATE
Signatı	ire: <u>Janathen Trauning</u>		07/16/2006 09:00 K: 1862 CT: 133349 BH: 332373
rinted	Name: JONCTHAN Grauwin	<b>1</b> 8	1 0 20.00 = 20.00 ASSUM NAME # 2

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