Capacity: **OWN**

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly, See instructions and province)



To the SECRETARY OF STATE OF Pursuant to Section 53-504, Idaho Cod gives notice of adoption of an Assume	de the undersigned
The assumed business name which the unbusiness is: WWW CYLLK	ndersigned use(s) in the transaction of
	s) of the entity or individual(s) doing me is/are: <u>Complete Address</u> 135み <u>5.3みの E.Malfa ID</u> 8334み 35み S.3スの E Malfa ID 8334み
3. The general type of business transacted up (mark only those that apply) Retail Trade Manufacturing Agriculture Construction 4. The name and address to which future correspondence should be addressed:	
NWM Cruk Rancw 1352 S 3200 E Malta 10 83342 5. Name and address for this acknowledgment copy is (if other than #4 above):	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720
21005 Bank 102 W. Main Burley 10 83318	Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 55/67/2001 09:00 CK: 588541143 CT: 86138 BH: 395645
Printed Name: Indd Powers	1 @ 20.80 = 20.00 ASSUM NAME # 2
	1 <u>K</u>

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