

## 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.

2005 AUG 17 AM 9: 22

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

	STATE OF TOAHO
. The assumed business name which the unders business is:	signed use(s) in the transaction of
The true name(s) and business address(es) of business under the assumed business name:	
Name	Complete Address
Donna L. Nelson 10	
13	ampa. 1D 83651
<ol> <li>The general type of business transacted under</li> </ol>	the assumed business name is:
Retail Trade Transportation an Wholesale Trade Construction	d Public Utilities
Services Agriculture Manufacturing Mining Finance, insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720
1012 12th Ave. 50 Nampa, 1D \$365]	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	Phone number (optional): $096-3424$
	Secretary of State use only
nature: L. M. e.s.  (signature required)  Net on ted Name: Donna L. Melson  pacity/Title: Owner	Sport undergrowing units growing the state of the state o
(see instruction # 8 on back of form)	98/17/2005 05:0 CK: 4314 CT: 158010 BH: 9866

1 0 25.00 = 25.00 ASSUM NAME # 2  $\bigcirc$