

**ASSUMED BUSINESS NAME** Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

**CERTIFICATE OF** 

03 DEC 12 AM 8: 50

FILED EFFECTIVE

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

1. The assumed business name which the und business is:	
2. The true name(s) and business address(es) business under the assumed business name Name  MICHAEL HEADY	Complete Address  SIQO OVERLAND RD  PMB 242  BUISE ID 83705
3. The general type of business transacted und  Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  5120 OVERLAND RD PM B 242 BOISE FD 83705	Submit Certificate of Assumed Business Name Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen copy is (if other than # 4 above):  Signature:	208-724-1678  Secretary of State use only
Printed Name: MICHAEL THEALS  Capacity/Title: OwnER  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE   12/12/2003 05:00   CK: 1605 CT: 174929 BH: 716296   1 0 25.00   assum hame 0 3

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