

(see instruction # 8 on back of form)

CERTIFICATE OF

ASSUMED BUSINESS NAME.

Pursuant to Section 53-504, Idaho Code, the undersigned 24 AM 9: 28 submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE Please type or print legibly. NOTE: See instructions on reverse before filing. STATE OF ICAMO

The assumed business name which the ur	ndersigned use(s) in the transaction of
business is:	1
The true name(s) and business address(estable) business under the assumed business nare	
Name	Complete Address
VICTOR VALLE	1941 CHEHALIS, DP.
	POST FALLS, 10 83854
The general type of business transacted upon the second seco	under the assumed business name is:
Retail Trade Transportatio Wholesale Trade Construction	on and Public Utilities
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
1941 CHCHALIS DR	Basement West PO Box 83720
POST FAILS, 10 83854	Boise ID 83720-0080
FDM 11113, 10 0.3031	208 334-2301
Name and address for this acknowledgm copy is (if other than # 4 above):	nent Phone number (optional):
	Secretary of State use only
	- ₈₀
Les lille	0105824
gnature:	1 7 1 0 2 0 0 1
inted Name: VILTOR VALLE	10000000000000000000000000000000000000
apacity/Title: OUNER	11/24/2006 05:06 CK: 1079 CT: 158010 BH: 101521
(see instruction # 8 on back of form)	5 1 0 25.00 = 25.00 ASSUM NAME