Capacity:

(see instruction #8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned 7 PH I2: 56			
gives notice of adoption of an Assumed Businesse Name ARY OF STATE 1. The assumed business name which the undersigned use(s) in the literal saldin Hof			
1.	business is:	oroignou doc	1 1
15V/4V	Carland Doing Business	4s Com	link
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	Name Boan Cakland Si		nplete Address
	tale . Cald & DO	TZ NOS	,
	47 Many Cardichias		
•	The second have a file value of the second have a second s	don the coor	nod husinoss name is:
3.	 The general type of business transacted under the assumed business name is: (mark only those that apply) 		
	Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	_	nsportation and Public Utilities ance, Insurance, and Real Estate ing
4.	The name and address to which future Pt correspondence should be addressed:	none number	(optional): <u>208 345 6 91 2</u>
	817 & Washington St	!	Submit Certificate of
	horse To 83712		Assumed Business Name and \$20.00 fee to:
_			Secretary of State 700 West Jefferson
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	t .	Basement West PO Box 83720
			Boise ID 83720-0080 208 334-2301
		1/88	Secretary of State use only
	2001	Revision 1/98	
Signature:			
Printed	Name: Brian Oakland	P. P	04/17/2002 05:00 CK: 4185 CT: 158810 BH: 459929

1 @ 20.90 = 20.00 ASSUM NAME # 2

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