## FILED EFFECTIVE



## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing. ATE

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STATE OF IDAHO

The assumed business name which the under business is:	<b>!</b>
Step Ahead Dane	:0
The true name(s) and business address(es) of business under the assumed business name:     Name	
3. The general type of business transacted unde	er the assumed business name is:
	nd Public Utilities
<ul> <li>Wholesale Trade</li></ul>	Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed:  Sheri Allred  221 West Main St.  Burley 10 83318	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	Phone number (optional):
Sher Allred  96 w 400 S  Burley 10 83318	Secretary of State use only
Printed Name: Sheri Allred	IDANO SECRETARY OF STATE  94/29/2003 65:00
Capacity/Title: Sole proprieto (see instruction #8 on back of form)	1DANO SECRETARY OF STATE  94/29/2003 05:200  CK: 1000 CT: 1500MP BH: 677423  1 0 25:00 = 25:00 ASSIM MOVE 1

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