CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly)

(Please type or print legi	IDAHO
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.	
Sun Pc	
2. The true name(s) and business address(e business under the assumed business name Name DONALD BLAKEMAN	me is/are: Complete Address
VONACO BLAKEMAN	
	IPANO FAMIS IO 83402
3. The general type of business transacted u (mark only those that apply) Retail Trade Manufacturin Wholesale Trade Agriculture Services Construction	ng Transportation and Public Utilities Finance, Insurance, and Real Estate
4. The name and address to which future correspondence should be addressed: 2929 DRUVOR IDANO FALLS ID 8340;	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State
5. Name and address for this acknowledgme copy is (if other than # 4 above):	700 West Jefferson
	Secretary of State use only
	1287
gnature: Oonald Bliken	IDANO SECRETARY OF STATE
inted Name: DONALD BLAKEMAN	Ø4/14/1999 Ø9:00 CK: 297 CT: 114053 BH: 207036
apacity: OWNER	CK: 297 CT: 114053 BH: 207036 1 0 20.00 = 20.00 ASSUM NAME # 2
(see instruction # 8 on back of form)	025028