

CERTIFICATE OF ASSUMED BUSINESS NAME

08 APR 21 AM 9: 28

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

SECRETARY OF STATE STATE OF IDAHO

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

The assumed business name which the unbusiness is:	ndersigned use(s) in the transaction of
2. The true name(s) and business address(est business under the assumed business name Name DAUNA Amy Plash 3. The general type of business transacted under the assumed business address(est business address) Name DAUNA Amy Plash	Complete Address Sof N. AIA POBOX 456 Sho Sh Ono Id 83352
	Submit Certificate of Assumed 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 acknowledgment copy is (if other than # 4 above);	2
	Secretary of State use only
Signature: (Signature required). Printed Name: DAWN A RANGE Capacity/Title: OWN & ON BOOK of form)	IDAHO SECRETARY OF STATE 4/21/2008 05:00 CK: 1207 CT: 225129 BH: 1110963 1 8 25.00 = 25.00 ASSUM MANE # 2

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