

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2004 OCT -8 AM 8: 34

STATE OF IDAHO

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

2. The true name(s) and <u>business</u> address(e business under the assumed business na	es) of the e	ntity or Individual(s) doing
<u>Name</u>		Complete Address
Lupe Moreno	Po Box 1269	
	BIA	ckfort ID 83221
3. The general type of business transacted u		
☐ Retail Trade ☐ Transportation ☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture		Submit Certificate of
ManufacturingMiningFinance, Insurance, and Real Estat	8	Assumed Business Name and \$25.00 fee to:
4. The name and address to which future		Secretary of State
correspondence should be addressed:		700 West Jefferson Basement West
Black foot ID 8322	(PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledge copy is (# other than # 4 above):	- nent	Phone number (optional):
		Secretary of State use only
inted Name: Lupe Morcus	erimitan Recordon,edd Indices CAZOTO	IDAHO SECRETARY OF STATE 10/08/2004 05:00
apacity/Title: Owner Operator	17	CK: 18881887756CLH CT: 172899 BH: 7781 1 8 25.88 = 25.88 ASSIM MONE # 2