

## 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.

STATE OF

ink in the line	9: 5 <b>5</b>
The true name(s) and business address(es) of th business under the assumed business name:	e entity or individual(s) doing
Name	Complete Address
Lisa Rae Hunter	106 West 550 South
Clay Steven Hunter	Victor, Idaho 83455
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed:  Clay or Lisa Hunter	Secretary of State 700 West Jefferson Basement West PO Box 83720
106 West 550 South	Boise ID 83720-0080
	208 334-2301
Victor, Idaho 83455  Name and address for this acknowledgment copy is (if other than #4 above).	Phone number (optional): 208-705-1041

Signature: (signature required)

Printed Name: (MATE)

Capacity/Title: Yav the

(see instruction # 8 on back of form)

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IDAHO SECRETARY OF STATE
10/12/2004 05:00
CK: 1332 CT: 158010 BH: 770613
1 @ 25.00 = 25.00 ASSUM MAME # 3

