

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.

The assumed business name which the undersigned use(s) in the transaction of business is: TRISTINE HIR 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address 3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Name and \$25.00 fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Secretary of State correspondence should be addressed: 700 West Jefferson **Basement West** PO Box 83720 Boise ID 83720-0080 208 334-2301 TOAHO 5. Name and address for this acknowledgment Phone number (optional): CODY IS (if other than # 4 above). 208-423-438-3

Secretary of State use only

Signature/
Printed Name: HARL MALCONE

Capacity/Title: OWNER -

(see instruction # 8 on back of form)

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IDANO SECRETARY OF STATE

92/13/2004 05:00

CK: 1881 CT: 158818 BH: 727488
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