

CERTIFICATE OF ASSUMED BUSINESS NAME

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

07 NOV 23 AM 9: 18 SECRETARY OF STATE STATE OF IDAHO

D117047

Please type or print legibly.

(see instruction # 8 on back of form)

NOTE: See instructions on reverse before filin 1. The assumed business name which the undersign business is:	
2. The true name(s) and business address(es) of the business under the assumed business name: Name White M. Alter 480	complete Address Silverpine Wy 151 TO 83109
3. The general type of business transacted under the Retail Trade Transportation and F Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: #804 S. Silly pink Wa.	
5. Name and address for this acknowledgment copy is (if other than # 4 above): Signature: Auton Printed Name: Lene M. Auton Capacity/Title: OWNW.	IDAHO SECRETARY OF STATE 1 1/23/2007 05 = 00 CK: 515464216 CT: 158010 BH: 1086632 1 0 25.00 = 25.00 ASSUM NAME # 2