227	
CERTIFICATE OF	FILED EFFECTIVE
ASSUMED BUSINESS	NAME II.IIII-6 AM 9:41
Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bus	: Undersigned
Please type or print legibly.	SECTO BY OF STATE
NOTE: See instructions on reverse before	filing.
 The assumed business name which the unde business is: 	
Derive'S Billiard Services	3
The true name(s) and business address(es) o business under the assumed business name:	of the entity or individual(s) doing
	Complete Address
Delille Wearbor	1320 north A street Courd Aten I
	83814
······································	
The general type of business transacted under	r the assumed business name is:
Retail Trade Transportation an	
Wholesale Trade Construction	
X Services Agriculture	
Manufacturing Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	
correspondence should be addressed:	Secretary of State 700 West Jefferson
	Basement West
Dealer Wearer 1320 north	PO Box 83720
A Street Coeur D' plene	Boise ID 83720-0080
Ipaho: 8.3814	208 334-2301
 Name and address for this acknowledgment COPY is (if other than # 4 above). 	Phone number (optional):
	Secretary of State use only
nted Name: Dealer Wealer pacity/Title:	_
nted Name: Deally Weally a	
nted Name: Death Weather	IDANO SECRETARY OF STATE
pacity/Title:	CK: 6936 CT: 158010 BH: 1277154
(see instruction # 8 on back of form)	1 @ 25.00 = 25.00 ASSUM NAME N 2
	D LUCARO 2
	1)148093