

Capacit\(\x\):

(see instruction #8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/EFFECTIVE

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

01 AUG 31 AM 9: 56

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

2. The true name(s) and <u>business</u> address(es) of th business under the assumed business name:	e entity or individual(s) doing
Name	Complete Address Boise
	BOSD III BRONDWAYSH 133 II
Stima Luedthe, 911	SW8"St. Gushom or 97080
3. The general type of business transacted under the	ne assumed business name is:
Retail Trade Transportation and	Public Utilities
☐ Wholesale Trade ☐ Construction	
✓ Services ☐ Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$20.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
Jachie Thomason	Basement West PO Box 83720
PANB III W BRONDWAY AVESTE 13:	
BOKE IN 83703	208 334-2301
5. Name and address for this asknowledgment	Phono number (antique)
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):

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08/31/2001 05:00 CK: 2252 CT: 158783 BH: 416858 1 8 20.00 = 20.00 ASSUM NAME # 2