FILER
FILED EFFECTIVE
STATE OF STATE STATE OF PARTS I use(s) in the transaction of
op. Mgmt. ntity or individual(s) doing
Complete Address DZMZ31L BOUED 83702
Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Phone number (optional): 208-713-1024
IDAHO SECRETARY OF STATE 10/05/2005 05:00 CK: 6024 CT: 192947 BH: 915175 1 0 25.00 = 25.00 ASSUM NAME #