

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. 2006 NOV 17 AM 8: 57

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

(see instruction # 8 on back of form)

SECRETARY OF STATE

2. The true name(s) and <u>business</u> address(es) of business under the assumed business name:	the entity or individual(s) doing
Name Aavon Lebaren 20	Complete Address 7 George Town Dr. ex barg TD 83440
3. The general type of business transacted under	the assumed business name is:
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Crystal A Fonton Ciso 135 west Main Rexaura TO , 83940	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 458 - 518 - 878
	Secretary of State use only
nature: (signature require) nted Name: Auon Abavon	IDAHO SECRETARY OF STATE 11/17/2006 05:00 CK: 98 CT: 286588 BH: 1814255 1 8 25.00 = 25.00 ASSUM NAME (

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