

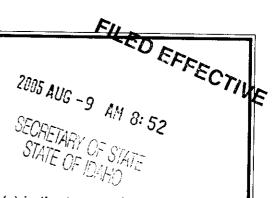
CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)



R	eal ESTATEs
The true name(s) and business address business under the assumed business Name Lucas and Tisha Ivey	(es) of the entity or individual(s) doing name: Complete Address 415 8th Ave. South Nampa Id, 83651
3. The general type of business transacted Retail Trade Transporta Wholesale Trade Construction	tion and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Est	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: Lucas and Tisha Ivey 415 8th Ave. South Nampa Id, 83651	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledged copy is (if other than # 4 above); 	ment Phone number (optional): 204 9501 10095
4	Secretary of State use only
Signature: Printed Name: Capacity/Title: Owner	IDAHO SECRETARY OF STATE IDAHO SECRETARY OF

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