

Printed Name: Dong 1d

Capacity/Title: o woner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned SEP 25 AN 9: 03 submits for filing a certificate of Assumed Business Name.

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

SECRETARY, OF STATE STATE OF JDAHO

2. The true name(s) and business address business under the assumed business names.	(es) of the entity or individual(s) doing
Name	Complete Address
Donald a Traci Kirby	471N400 E FIFTH Id 832
3. The general type of business transacted	under the assumed business name is:
Retail Trade Transportati Wholesale Trade Constructio Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estat	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: Don Kirby 471 N 400 E Firth Td 83236	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgn copy is (if other than # 4 above):	nent Phone number (optional):

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IDAHO SECRETARY OF STATE

99/25/2006 05:00

CK: 8958 CT: 158010 BH: 976687

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