



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.

FILED EFFECTIVE

2007 JUL -9 AM 8:49

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of
business is:

GOOD AFTER MOVE

2. The true name(s) and business address(es) of the entity or individual(s) doing
business under the assumed business name:

Name

LINDSIE M MURRAY

Complete Address

9063 RUTH ST

BOISE, ID 83704

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future
correspondence should be addressed:

9063 RUTH ST

BOISE, ID 83704

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

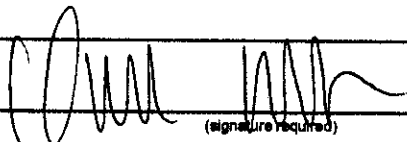
Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

5. Name and address for this acknowledgment
copy is (if other than # 4 above):

Phone number (optional):

208-713-9604

Signature:



(signature required)

Printed Name:

LINDSIE M MURRAY

Capacity/Title:

OWNER

(see instruction # 8 on back of form)

Secretary of State use only

g:\opform\form\form1.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
07/09/2007 05:00
CK: 604162138 CT: 150010 BH: 1064477
1 @ 25.00 = 25.00 ASSUM NAME # 2

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