227	
CERTIFICATE OF	FILED EFFECTIVE
ASSUMED BUSINESS NAM	IE
Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business N	gned 05 0CT 26 PM 1:37 ame.
Please type or print legibly. NOTE: See instructions on reverse before filing.	SECRETARY OF STATE STATE OF IDAHO
1. The assumed business name which the undersigned use(s) in the transaction of business is:	
2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: <u>Name</u> <u>KARI K. Led Ford</u> <u>875 E. PLAZA</u> <u>Suite</u> 102 <u>EABLE, TD</u> <u>83616</u>	
 3. The general type of business transacted under the a Retail Trade Transportation and Put Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: KARI K. Ledford 332 South Golden EABLE EABLE ID 83616 5. Name and address for this acknowledgment copy is (if other than #4 above): 	
332 South Ooken EAOE EAOE JD 834/6 Signature Arr K. Leo Ford Capacity/Title: OWNER (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 10/26/2005 05:00 CK: 2712 CT: 180227 BH: 918987 1 0 25.00 = 25.00 ASSUM NAME # 3 M 3032