JANA STATE			
CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)			
To the SECRETARY OF STATE, STATE of the undersigned Pursuant to Section 53-504, Idaho Code, the undersigned Pursuant to Section 54-504, Idaho Code, Idaho Code			
1. The assumed business name which the undersigned use(s) in the transaction of business is:			
2. The true name(s) and business address(es) of the entity or individual(s) doing			
	Name Name 127 4	mplete Address Mile Rd Snoshune Ud 83852	
	Michelle Wright	u .	
3. The general type of business transacted under the assumed business name is:			
	Retail Trade		
4. The name and address to which future Phone number (optional): 208 886 8 correspondence should be addressed:			
	Burt Wright	Submit Certificate of Assumed Business Name and \$20.00 fee to:	
	Sho stone, Id 83352	Secretary of State 700 West Jefferson Basement West	
	5. Name and address for this acknowledgment copy is (if other than # 4 above).	PO Box 83720 Boise ID 83720-0080 208 334-2301	
IDAHO SECRETARY OF STATE		Secretary of State use only IDAHO SECRETARY OF STATE	
	Signature: 4//chille High	04/27/2000 09:00 CX: 1698 CT: 138313 NH: 312788 1 2 28.06 = 28.06 ASSUM NAME # 2	
	Printed Name: M. chelle Wight	D35345	
	Capacity: (0 - ()) (see ir struction # 8 on back of form)		