

Capacity/Title: <u>/) ωη ε</u>γ

(see instruction # 8 on back of form)

CERTIFICATE OF CERTIFICATE OF ASSUMED BUSINESS NAME 2005 AUG 26 RN 9: 18

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed B Please type or print legibly.	Business Name COETAGO OF STATE STATE OF TOWN
 NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Hopper's Goodies 	
The true name(s) and business address(es business under the assumed business name Name	· · · · · · · · · · · · · · · · · · ·
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to:
Drian Hopper 1272 M. Mountain View Rd. Mozow ID 43843 5. Name and address for this acknowledgm copy is (if other than #4 above):	Boise ID 83720-0080 208 334-2301
Signature: Brian Hopper	Secretary of State use only Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE

08/26/2005 05:00 CK: 1320 CT: 158010 BH: 988362 1 0 25.00 = 25.00 ASSUM NAME # 2

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