

CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

97 MAY 7 5 PM 2:47

SECRETARY OF STATE
STATE OF IDAHO

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

THREE SHOOZ ENTERPRISES

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

Name	Address
Duane Shoemaker	54 N 400 W Blackfoot Id
Debbie Shoemaker	54 N 400 W Blackfoot, Id

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

sole proprietor

See categories on the reverse Services and Wholesale

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

THREE SHOOZ ENTERPRISES

54 North 300 West

Blackfoot, ID

83221

Signed

Duane Shoemaker

By

Co Owner Three Shooz Ent.

Capacity

Co Owner

Submit Certificate of Assumed
Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

Secretary of State use only

Revision 10/95
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IDAHO SECRETARY OF STATE
DATE 05/05/1997
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CK #: 888159 CUST# 2063
ASSUM NAME 10 20.00= 20.00

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