## MILED/EFFECTIVE

## CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO  Pursuant to Section 53-504, Idaho Code, the undersigned gives notice to TATE adoption of an Assumed Business Name.	
The assumed business name which the undersigned use(s) in the transaction of business is:	
WILLIAMS ENTERPRISE	
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 ////05	Address TMM + D8325
LYNDON WILLIAMS 339 N. 6th St.	
Business = P.O. Box 175	
	montpelia 83254
3. The general type of business transacted under the assumed business name is:  (9) SERVICES  See categories on the reverse	
4. The name and address to which correspondence should be addressed:  **TERPRISE**	
P.O. BOX 175 MONTPELIER, ID, 83254-0174	
1.0.BUX 1/3 FILVIFIZIZE, 10, A3207 0111	
Signed Lyndon Williams	
By LYNDON WILLIAMS	
·	MANAGER
Submit Certificate of Assumed	Customer#
Business Name and \$20.00 fee to:	Secretary of State use only
Secretary of State	19AHO SECRETARY OF STATE  94/20/2001 09:00  CK: 3344 CT: 145327 BH: 392482
700 West Jefferson PO Box 83720	64/26/2661 69:06 CK: 3344 CT: 145327 BH: 392482
Boise ID 83720-0080	1 # 28.66 = 26.66 ASSUM MANE # 2
	9wd:

D44603