

Signature: /X)/W/LI

(see instruction # 8 on back of form)

Printed Name:

Capacity:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name 25 SEP 25 PM 2: 13

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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 business under the assumed business name: Name Complete Address 3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Name and \$20.00 fee to: Finance, Insurance, and Real Estate 25.00 4. The name and address to which future Secretary of State correspondence should be addressed: 700 West Jefferson **Basement West** PO Box 83720 Boise ID 83720-0080 208 334-2301 5. Name and address for this acknowledgment Phone number (optional): CODY IS (if other than # 4 above): 708 948 9/011 Secretary of State use only

> Complomstabn formstabn Revised 01/2001

IDAHO SECRETARY OF STATE 09/27/2005 05:00 CK: 9856794 CT: 158010 BH: 913784 1 @ 25.00 = 25.00 ASSUM NAME # 2

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