

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idano Code, the disease. 2013 JUL 14 PM 2: 14 Pursuant to Section 53-504, Idaho Code, the undersigned

Please type or print legibly. NOTE: See instructions on reverse before filing.

	NOTE: See instructions on reverse before fili	19.
		STATE OF IDAHO
1.	The assumed business name which the undersign business is:	gned use(s) in the transaction of
2.	The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Cary Hart Noble Sa Miriam Elizabeth Ownbey 104	9 Garden St. Napoint Id. 83864
3.	The general type of business transacted under th	e assumed business name is:
	Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
,		Secretary of State use only

Signature,

Printed Name:

Capacity/Title: Own or

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE **97/14/2003 05:00** CK: 2239 CT: 171515 BH: 691025 1 9 25.00 = 25.00 ASSUM NAME # 2