

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.

2004 DEC -6 NY 10: 20

TSTATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SOCO	CER PASSION		
The true name(s) and business address business under the assumed business n Name ABRAHAM LOPEZ	ame:	entity or individual(s) doing Complete Address NERAL WELLS, MERIDIAN IDAHO. 83642	
3. The general type of business transacted Retail Trade Transportati Wholesale Trade Construction	ion and Publi		
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	te	Submit Certificate of Assumed Business Name and \$25.00 fee to:	
The name and address to which future correspondence should be addressed: ABRAHAM LOPEZ 585 N MINERAL WELLS, MERIDIAN. IDAHO 83642		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
 Name and address for this acknowledge copy is (if other than #4 above); 	nent	Phone number (optional):	
	5	Secretary of State use only	
gnature:	Op/forms/abn forms/abn p65 Revised 04.2003		
inted Name: ABRAHAM LOPEZ	forms/abn form Revised 04,2003		
apacity/Title:OWNER	A Table	*****	

IDANG SECRETARY OF STATE

12/06/2004 05:00

CK: 220 CT: 158818 BH: 779924

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