

CERTIFICATE OF ASSUMED BUSINESS NAME

***	OFBTICIOATE OF	FILED EFFECTIVE
	CERTIFICATE OF	AF (**)2/
	ASSUMED BUSINESS NAM	VIE
29139	Pursuant to Section 53-504, Idaho Code, the under submits for filing a certificate of Assumed Business	Name.
81/	Please type or print legibly. OTE: See instructions on reverse before filing	VIE signed Name.
N	TE: See mistructions on leverse before ming	,
	ssumed business name which the undersign	ed use(s) in the transaction of
busin	ess is:	<i>L</i>
<u></u>	Cinder Butte Proper	165
. The t	rue name(s) and business address(es) of the	entity or individual(s) doing
busin	ess under the assumed business name:	Complete Address
	Name Heath Strand	Complete Address
		10.00x 131
 3. The g	Jovien Stroud general type of business transacted under the	dazelton 1083335
	Lorien Stroud	assumed business name is:
4. The r corre	general type of business transacted under the Retail Trade Transportation and P Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate name and address to which future spondence should be addressed:	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

Printed Name: Lovien Stroud

(see instruction # 8 on back of form)

Capacity/Title: //////

IDAHO SECRETARY OF STATE

04/21/2004 05:00

CK: 215 CT: 158010 BH: 740538

0 25.00 = 25.00 ASSUM MANE # 2