

Capacity/Title:_

owner (see instruction # 8 on back of form)

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. -6 AM 9: 55

Please type or print legibly.

NOTE: See instructions on reverse before	filing.
The assumed business name which the under business is:	rsigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) or business under the assumed business name: Name Travis J. Dye Adele M. Dye	Complete Address 591 Maple Drive 591 Maple Drive
3. The general type of business transacted under Retail Trade Transportation an Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future	
correspondence should be addressed: <u>591 Maple Drive</u> <u>Rexburg, TD 83440</u>	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): (208)656-0347
	Secretary of State use only
Signature:	TRAIR PERFETANCE AT TAXABLE

IDAHO SECRETARY OF STATE

99/06/2005 05:00

CK: 283 CT: 158810 BH: 989889

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