

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned **FILED/EFFECTIVE** submits for filing a certificate of Assumed Business Name. 02 AUG 12 PM 2: 33

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

STATE OF IDAHO

L.S. ASSO	•	-		····	
The true name(s) and <u>business</u> address(es business under the assumed business name		ntity or individe	ual(s) doing		
<u>Name</u>		Complete Address			
ROXIE L. BARTELS			bolestan		
	ME	RIDIAN	LOADO	<u>836</u> 42	
3. The general type of business transacted ur Retail Trade Transportation Wholesale Trade Construction Services Agriculture				٦	
Manufacturing Mining Finance, Insurance, and Real Estate		Assumed			
4. The name and address to which future correspondence should be addressed:		Secretary 700 West Basement	Jefferson West		
2023 W. 1666lestine Meriovan Io 83642		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): 208-984-4/22			
		Secretary of State use only			
Signature: Kotelo Printed Name: Kotelo Capacity/Title: Ow NEK	orp Vorms labn forms labn, p65 Rewsed 12/2001	28 Ck:	CASH CT: 158010 I	STATE 05 = 00 3H: 482368 SUM NAME # 2	

D 57295