

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

(see instruction # 8 on back of form)

CERTIFICATE OF	M.A.
ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, t	S NAME
submits for filing a certificate of Assumed E	Business Name.
Please type or print legibly. NOTE: See instructions on reverse befo	are filing
	The way with
The assumed business name which the un business is:	
EnviroTech Systems	
The true name(s) and business address(es business under the assumed business name  Name	ne:
Krista D. Anderson	Complete Address
KITSILE D. AIIMEISON	923 N. Maple Grove Rd. #204
	Boise, 1D 83704-1000
The general type of business transacted un-	der the assumed business name is:
Wholesale Trade Construction	and Public Utilities
Services Agriculture Manufacturing Mining	Submit Certificate of
<ul><li>Manufacturing</li><li>Mining</li><li>Finance, Insurance, and Real Estate</li></ul>	Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
Krista Anderson	Basement West PO Box 83720
923 N. Maple Grove Rd. # 204	Boise ID 83720-0080
Boise, 10 83704	208 334-2301
5. Name and address for this acknowledgmen	nt Phone number (optional):
COPY IS (if other than # 4 above);	208-377-3987
	Secretary of State use only
Signature: Kuista D. Anderson	Revised Out 2003 1990 SECRETORY OF STATE OUT 2003 1990 SECRETORY OUT 2003 1
Printed Name: Krista D. Anderson	Revised Out; DDS
Capacity/Title: Owner	IDAHO SECRETARY OF ATTACH

IDAHO SECRETARY OF STATE

07/26/2004 05:00

CK: 1414 CT: 158010 BH: 757472
1 0 25.00 = 25.00 ASSUM NAME # 2

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