

## **CERTIFICATE OF** Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name CRETARY OF STATE Please type or print legibly. STATE OF IDAHO TE: See instructions on reverse before filing.

NOTE: See instructions on reverse before filing.

Wendy M. Kaschmitter

(see instruction # 8 on back of form)

**Printed Name:** 

Capacity/Title:

	W.K. Services	
e true name(s) and business address(es) siness under the assumed business name Name Wendy Kaschmitter	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate te name and address to which future trespondence should be addressed:	der the assumed business name is:  and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:  Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080	
Vendy Kaschmitter  1 Fairview Rd.	(208) 334-2301	
irangeville, ID 83530	(200) 354-2501	