

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

CERTIFICATE OF  ASSUMED BUSINESS N  Pursuant to Section 53-504, Idaho Code, the ur submits for filing a certificate of Assumed Busin  Please type or print legibly.  NOTE: See instructions on reverse before file.  1. The assumed business name which the unders business is:  Miller's Plur	ess Name.  Iling.  signed use(s) in the transaction of
Wholesale Trade Construction	Complete Address 425 E 5th N - St. Anthony ID 83445 er the assumed business name is: and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Same	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  (208) 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):  Same  Signature: (signature required)  Printed Name: (signature required)  Capacity/Title: Owner  (see instruction # 8 on back of form)	Secretary of State use only  Secretary of State use only  IDAHO SECRETARY OF STATE  12/24/2007 05:200  CK: 15445 CT: 71969 BH: 1691218  1 6 25.66 = 25.66 ASSUM NAME # 2

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