

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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SULL TYPO SING Shin OF TURNO

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly. Instructions are included on back of application.

1.	The assumed business name which the unbusiness is:	he Way	a use(s) in the transaction of	
2 .	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address			
	William A Nelson	POB 876	Ponderay, ID 83852	
3.	The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction			
	Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	,	Submit Certificate of Assumed Business Name and \$25.00 fee to:	
4.	The name and address to which future correspondence should be addressed: William A Nelson		Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080	
	POB 876 Ponderay, ID 83852		208 334-2301	
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	nt		
	The state of the s		Secretary of State use only	
	iture: Why Jerry			
	ed Name: William A Nelson			
Capa	city/Title: Sole Proprietor			
Signa	Signature:		IDAHO SECRETARY OF STATE 96/11/2012 95:90 CK: 5569 CT: 271343 BH: 1327860 1 8 25.88 = 25.88 OSSIM NAME # 2	
Printe	Printed Name:			
Cana	city/Title:	}	1 0 25.00 = 25.00 ASSUM NAME # 2	

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Capacity/Title:__