



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 MAR 24 PM 1:02

Please type or print legibly.

NOTE: See Instructions on reverse before filing.

SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Hunt Appraisal

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Jefferson L. Hunt

Complete Address

3245 Joanna Ct., American Falls, ID 83211

3. The general type of business transacted under the assumed business name is:

- |                                     |                                     |                          |                                     |
|-------------------------------------|-------------------------------------|--------------------------|-------------------------------------|
| <input type="checkbox"/>            | Retail Trade                        | <input type="checkbox"/> | Transportation and Public Utilities |
| <input type="checkbox"/>            | Wholesale Trade                     | <input type="checkbox"/> | Construction                        |
| <input type="checkbox"/>            | Services                            | <input type="checkbox"/> | Agriculture                         |
| <input type="checkbox"/>            | Manufacturing                       | <input type="checkbox"/> | Mining                              |
| <input checked="" type="checkbox"/> | Finance, Insurance, and Real Estate |                          |                                     |

4. The name and address to which future correspondence should be addressed:

Hunt Appraisal

Jefferson L. Hunt

3245 Joanna Ct., American Falls, ID 83211

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):

Secretary of State use only

Signature:

(signature required)

Printed Name: Jefferson Hunt

Capacity/Title: owner

(see instruction # 8 on back of form)

Information Form 500  
Revised 06/2003

IDaho SECRETARY OF STATE  
03/25/2008 05:00  
CK: 852 CT: 158818 BH: 1106474  
1 P 25.00 = 25.00 ASSUM NAME # 2

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