

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE 2014 AUG 21 AN 9: 01

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

STATE OF CARD

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

Covey Enterprises     The true name(s) and <u>business</u> address(e business under the assumed business names).	es) of the entity or individual(s) doing	
Name	Complete Address	
Jonathan Covey	1125 Pennsylvania Emmett ID 83617	
	PO Box 212 Letha, ID 83636	
Wholesale Trade Construction	on and Public Utilities	
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estat	Submit Certificate of Assumed Business Name and \$25.00 fee to:	
The name and address to which future correspondence should be addressed:     Jonathan Covey     PO Box 212	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080	
Letha ID 83636	208 334-2301	
5. Name and address for this acknowledgm copy is (if other than # 4 above):	ent	
	Secretary of State use only	
Printed Name: Jonathan Covey Capacity/Title: Owner	idaho secretary of state 08/21/2014 05:00	
Signature:	CK:2428050 CT:300316 BH:14 16 25.00 = 25.00 ASSUM NAI	
Printed Name:		

abri.pmd Rev. 07/2010

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Capacity/Title: