

Capacity/Title:_

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

07 OCT 18 PM 1:41

SECRETARY OF STATE STATE OF IDAHO

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

Please type or print legibly.
NOTE: See instructions on reverse before filing.

Rosaio Alvarz	Complete Address 1196 E Cugar Creek meridian 12 83642
The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: 196 Gago Creek MCR 1012m 10	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
MCRIDIAN 12) 83646 Name and address for this acknowledgme copy is (if other than #4 above):	

IDAHO SECRETARY OF STATE
10/18/2007 05:00
CK: 1314588 CT: 172099 BH: 1681235
1 0 25.00 assum name 0 2

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