

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED F

COTIVE

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

113 DEC 12 PM 4: 10

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

SECRETARY OF STATE STATE OF IDAHO

2. The true name(s) and business address(es) business under the assumed business name Name  CAROL Montierth	of the entity or individual(s) doing
	der the assumed business name is: and Public Utilities
<ul> <li>Wholesale Trade ☐ Construction</li> <li>X Services ☐ Agriculture</li> <li>☐ Manufacturing ☐ Mining</li> <li>☐ Finance, Insurance, and Real Estate</li> </ul>	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  7175 N. Springcrest Place  Meridian , Idaho 83642	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	Phone number (optional): (208)631-03>1
	Secretary of State use only
rinted Name: Carol Montierth  apacity/Title: OWNEV  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  12/12/2003 05:06  CK: 3463 CT: 158010 BH: 716499  1 0 25.00 = 25.00 ASSUM NAME

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