## **CERTIFICATE OF** ASSUMED BUSINESS NAME

EILED EFFECTIVE

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

2016 OCT -3 FAT 8: 56

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

(see instruction # 8 on back of form)

2. The true name(s) and business address(e business under the assumed business name  Name	es) of the entity or individual(s) doing me:  Complete Address  2072 to Orematord Marphy ID 83
3. The general type of business transacted under the services and services and Real Estate  4. The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
rinted Name: (signature required)  apacity/Title: (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  10/03/2006 05:00  CK: 131 CT: 158018 BH: 978315  1 0 25.00 = 25.00 ASSUM NAME #