## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO, Pursuant to Section 53-504, Idaho Code, the undersigned \$ 12

	gives notice of adoption of an Assumed Bus  The assumed business name which the undersigned u business is:  The true name(s) and business address(es) of the entition	se(s) in the transaction of
	business under the assumed business name is/are:  Name  Co	omplete Address ODN. BIKFt. ID. 83221-5410
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)	
	☐ Wholesale Trade       ☐ Agriculture       ☐ Fill         ☒ Services       ☐ Construction       ☐ M	ransportation and Public Utilities nance, Insurance, and Real Estate ining
4.	The name and address to which future Phone number (optional): 208-684-9716 correspondence should be addressed:	
	667 W. 200 N.	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
_	Mane and address for this acknowledgment	Secretary of State 700 West Jefferson
5.	COPY is (if other than # 4 above).	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301

D 412396

Si Printed Name: JODZ L. WERNER

Capacity:

(see instruction # 8 on back of form)