

Capacity/Title: Onner

(see instruction # 8 on back of form)

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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.

FILED DIFFERENCE

72

05 OCT 17 PM 1:40

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the undersign business is:  Saturite Dis	
2. The true name(s) and <u>business</u> address(es) of the	
business under the assumed business name:  Name  Nik F. Martin	Complete Address
Fred S. Martin 36	1254 Tangee St. 120 12 N. Tumbleweed 83-
The general type of business transacted under the second content of the second cont	
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  3472 V Tumblewled Soise ID \$3773	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
<ol><li>Name and address for this acknowledgment copy is (if other than #4 above):</li></ol>	Phone number (optional):
	Secretary of State use only
nature: Muk F. Mastin 1993 und	IDAHO SECRETARY OF STATE 10/17/2005 05:06 CK: 2960 CT: 193333 BH: 91736

IDAHO SECRETARY OF STATE
10/17/2005 05:00
CK: 2960 CT: 193333 BH: 917309
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