

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

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FILED EFFECTIVE

2013 DEC 27 AM 8: 27

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

Julee Willow	
<ol><li>The true name(s) and <u>business</u> address(es business under the assumed business named)</li></ol>	ne:
<u>Name</u>	Complete Address
Julee Brown	237 Elm St
	Twin Falls, ID 83301
3. The general type of business transacted un	nder the assumed business name is:
Retail Trade Transportation	and Public Utilities
Wholesale Trade Construction	
Services	Cultural Control of
☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
☐ Finance, Insurance, and Real Estate	
4. The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street
237 Elm St	PO Box 83720 Boise ID 83720-0080
Twin Falls ID 83301	208 334-2301
5. Name and address for this acknowledgmer	nt
COPY IS (if other than # 4 above):	
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inted Name: Julee Brown	
apacity/Title:_ <u>() W/IC</u>	
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