

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 DEC 30 AM 8: 46

SECRETARY OF STATE STATE OF IDAHO

## Please type or print legibly. Instructions are included on back of application.

M Vest G	Gunsmithing
The true name(s) and <u>business</u> address(es business under the assumed business nan	ne:
<u>Name</u> Michael A Vest	Complete Address
Michael A Vest	427 Alpine Pl. Sandpoint ID 83864
3. The general type of business transacted ur	nder the assumed business name is:
Retail Trade Transportation  Wholesale Trade Construction  Services Agriculture	and Public Utilities
☐ Manufacturing ☐ Mining	Submit Certificate of
Finance, Insurance, and Real Estate	Assumed Business
insurance, insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street
Michael Vest	PO Box 83720 Boise ID 83720-0080
427 Alpine PI.	208 334-2301
Sandpoint ID 83864	
<ol><li>Name and address for this acknowledgment</li></ol>	nt .
COPY is (if other than # 4 above):	
an 0 () 1 1 a	Secretary of State upe only
nature: //what list	
ted Name: Michael Vest	The state of the s
pacity/Title: Owner	Section 1997 and the section of the
nature:	
ited Name:	IDAHO SECRETARY OF STATE 12/30/2010 05:0
ILEU INGILIE.	CK: 2246 CT: 158010 BH: 1252

D144239

abn.pmd Rev. 07/2010