

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

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

## FILED EFFECTIVE 2014 AUG 25 AM 9: 05

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

2. The true name(s) and <u>business</u> address(es business under the assumed business names na	•
Name	Complete Address
	221 Old Hwy 2 Loop
	Moyie Springs, ID 83845
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State
correspondence should be addressed:  Mary Louise Cook	450 North 4th Street PO Box 83720
221 Old Hwy 2 Loop	Boise ID 83720-0080
	208 334-2301
Moyle Springs, ID 83845	
	nt
5. Name and address for this acknowledgmen	nt Secretary of State use only

IDAHO SECRETARY OF STATE 08/25/2014 05:00

CK:5041 CT:231340 BH:1438505 16 25.00 = 25.00 ASSUM NAME #2

0173347

Capacity/Title: Sole Owner

Signature: \_\_

Printed Name: \_ Capacity/Title:\_\_