

## **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

2012 APR 25 PM 1: 00

SECRETARY UP STATE STATE OF IDAHO

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

	Flanega	n Consulting
2.	The true name(s) and <u>business</u> address(e business under the assumed business name Name  Keegan Flanegan	s) of the entity or individual(s) doing me: <u>Complete Address</u> 1217 Broadway Ave. Ste.105-188, Boise, ID 83706
3.	Retail Trade Transportation and Public Utilities  Wholesale Trade Construction	
	✓ Services	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4.	The name and address to which future correspondence should be addressed: 1217 Broadway Ave	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
	Ste 105-188 Boise, ID 83706	208 334-2301
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	nt
<b>.</b> .		Secretary of State use only
-	ture: Keegan Flanegan	
	city/Title: Owner	
•	ture:	IDAHO SECRETARY OF STATE
-	d Name:	04/25/2012 05:20 CK: 974876 CT: 172899 BH: 1321379
	city/Title:	1 9 25.00 = 25.00 ASSUM NAME W

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