

Printed Name:

Capacity/Title:_

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

	FILED EFF CO.T.
CERTIFICATE OF ASSUMED BUSINESS NA Pursuant to Section 53-504, Idaho Code, the und submits for filing a certificate of Assumed Busines Please type or print legibly. NOTE: See instructions on reverse before filing	lersigned ss Name.
The assumed business name which the undersign business is:	gned use(s) in the transaction of
2. The true name(s) and business address(es) of the business under the assumed business name: Name 100 100 100 100 100 100 100 1	complete Address Ramsgatl Mden, Val. 83835
3. The general type of business transacted under the 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: David Craig 9293 Ramsgate Hayden, Jd. 83835 5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE 96/09/2008 95:00 CK: 2604 CT: 226737 BH: 1118741 1 8 25.00 = 25.00 ASSUM NAME # 2

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