

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

62 AMS -1 An 9:10

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SHOLD STATE STATE OF EDEHO

2. The true name(s) and <u>business</u> address(establishess under the assumed business name Name Same Bolopus	es) of the entity or individual(s) doing nme: Complete Address 3623 Hubbard Lane Wew Me Tip No. 5 Y
☐ Wholesale Trade ☐ Construction	n and Public Utilities
ServicesManufacturingMiningFinance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: 3633 Hubband Lone New Mendows ID 83659	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above). 	ent Phone number (optional):
	Secretary of State use only
nature:	IDAHO SECRETARY OF STATE IDAHO SECRETARY OF STATE OB/01/2005 05:00 CK: CASH CT: 158010 BH: 82420 1 0 25.66 = 25.00 ASSUM NAME