## **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** 

Please type or print legibly. Instructions are included on back of application. 2013 PEC 13 AM 8: 42
SEGMENT OF A FIRE

4 =	**************************************
<ol> <li>The assumed business name which the ur business is:</li> </ol>	ndersigned use(s) in the transaction of
Galli Works	
<ol><li>The true name(s) and <u>business</u> address(es business under the assumed business nar</li></ol>	s) of the entity or individual(s) doing me:
Name	Complete Address
David Rudy Galli	125 Heath dr.
	Riggins, ID 83549
3. The general type of business transacted up	nder the assumed business name is:
	n and Public Utilities
Wholesale Trade 🗹 Construction	
☑ Services ☐ Agriculture	
Manufacturing Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Constant of Chats
correspondence should be addressed:	Secretary of State 450 North 4th Street
125 Heath dr.	PO Box 83720
Rivain 5 ED 83549	Boise ID 83720-0080
	208 334-2301
5. Name and address for this acknowledgmen	nt
COpy is (if other than # 4 above):	
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Se l'au	Secretary of State use only
Signature: Dawid Lakin	
Printed Name: David Galli	
Capacity/Title: Owner	
Signature:	IDAHO SECRETARY OF STATE
rinted Name: 12/13/201	12/13/2013 05:00 CK: 632 CT: 298686 BH: 1491616
Capacity/Title:	1 8 25.00 = 25.00 ASSUM NAME # 2

abn.pmd Rev. 07/2010

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