

Capacity/Title:

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

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

Please type or print legibly. NOTE: See instructions on reverse before filing. 2607 JM1 24 AH 8 44

	······································
The true name(s) and business address(es) business under the assumed business nam	o) of the entity or individual(s) doing
Name	Complete Address
Sean Farnsworth	3765 N. 2381 E. Filer, Idaho 83328
Vicki Farnsworth	3765 N. 2381 E. Filer, Idaho 83328
The general type of business transacted un	
Retail Trade Transportation Wholesale Trade Construction	and Public Utilities
✓ Services	***
☐ Manufacturing ☐ Mining	Submit Certificate of
Finance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
3765 N. 2381 E.	PO Box 83720
Filer, ID. 83328	Boise ID 83720-0080
	208 334-2301
Name and address for this acknowledgmen	nt Phone number (optional):
COPY IS (if other than # 4 above).	
Zions Bank	
1411 Fillmore St. N. Suite 600	Secretary of State use only
Twin Falls, ID. 83301	
ure: Son Taxons A	ms/abn forms/abn p65
	19

Owner

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE
01/24/2007 05:00
CK: 262036733 CT: 158010 BH: 1028267
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