

## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 08 DEC -5 PM 1:04 submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

Owner

(see instruction # 8 on back of form)

Capacity/Title:

SECRETARY OF STATE STATE OF IDAHO

business under the assumed business name	of the entity or individual(s) doing	
Name	Complete Address	,
Kimberli Telford	P.O. Box 610 Meridian Id. 83680	
		<u>:</u>
The general type of business transacted und  Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:  Kimberli Telford  P.O. Box 610 Meridian Id. 83680	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301	
5. Name and address for this acknowledgmen	ıt .	- F
COPY IS (if other than # 4 above).		
	· ·	

IDAHO SECRETARY OF STATE

12/05/2008 05:00

CK: 3374 CT: 232084 BH: 1147897

1 B 25.88 = 25.08 ASSUM NAME 1

D126742