

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 MAY 11 AM 8: 23

## Please type or print legibly. Instructions are included on back of application.

SECR. BY OF STATE STATE OF IDAHO

	s Alterations
The true name(s) and <u>business</u> address(es business under the assumed business nam Name  Remza Jasarevic  Esef Jasarevic	
3. The general type of business transacted un  Retail Trade Transportation Wholesale Trade Construction Services Agriculture	n and Public Utilities
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
The name and address to which future correspondence should be addressed:     1688 Kimberly RD Suite 4-A	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
Twin Falls, ID 83301	208 334-2301
5. Name and address for this acknowledgmen copy is (if other than # 4 above):  Remza Jasarevic	ent
1688 Kimberly RD Suite 4-A	
Twin Falls, ID 83301 gnature: Rewad Jasurevic	Secretary of State use only
inted Name: Remza Jasarevic	
apacity/Title: Owner	
	IDAHO SECRETARY OF STATE

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