

Capacity/Title:_Sole

Printed Name: __

Capacity/Title:

Signature:

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.

2014 JAN 13 AM 9: 28

<u>Please type or print legibly.</u> <u>Instructions are included on back of application.</u>

SECRETARY OF STATE

The true name(s) and <u>business</u> address(es) o business under the assumed business name:	
<u>Name</u>	Complete Address
Victoria Elledge 11	75 Dailey Road, Potlatch, II
The general type of business transacted unde	er the assumed business name is:
	nd Public Utilities
Wholesale Trade Construction	
⊠ Services	
	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future	Secretory of State
согтеspondence should be addressed:	Secretary of State 450 North 4th Street
Victoria Elledae	PO Box 83720
/	Boise ID 83720-0080
1175 Dailey Road	208 334-2301
Potlatch to 83855	
Name and address for this acknowledgment	
COPY IS (if other than #4 above):	

IDAHO SECKETARY OF STATE
31/13/2014 45:00
CK: 50070376123 CT: 124962 BH: 1405037
1 2 25.00 = 25.00 ASSUM NAME # 2

D168086

aboutered Ray 07/2019