

CERTIFICATE OF

FILED EFFECTIVE

ASSUMED BUSINESS NAME IN APR 20 PH 4: 05 Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name STATE OF IDAHO

NOTE: See instructions on reverse before filing.

Owner

(see instruction #8 on back of form)

Capacity/Title:

	hing Unique
2. The true name(s) and business address(e business under the assumed business na Name Michael L. Fryman ———————————————————————————————————	(es) of the entity or individual(s) doing ame: Complete Address 2041 E. Goldleaf Ln., Coeur d'Alene, ID 83815
	ion and Public Utilities
 ✓ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business
f. The name and address to which future correspondence should be addressed: Michael L. Fryman	Idaho Secretary of State 450 N 4th Street PO Box 83720 Bolse ID 83720-0080
2041 E. Goldleaf Ln. Coeur d'Alene, ID 83815	(208) 334-2301
5. Name and address for this acknowledgm copy is (if other than #4 above):	- nent
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	Secretary of State use only Secretary of State use only Secretary of State use only Secretary of State use only