

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.

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SECRETARY OF STATE STATE OF IDAHO

AAA FLOOD	RESCUE
The true name(s) and business address(es) or business under the assumed business name: Name	Complete Address
SCOTT RECORD	255 BLUE LAKES BLVD N #516
	TWIN FALLS ID 83301
3. The general type of business transacted under	r the assumed husiness name is:
Retail Trade Transportation ar Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: SCOTT RECORD 255 BLUE LAKES BLVD N #516	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
TWIN FALLS ID 83301 5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
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nted Name: SCOTT RECORD	E SOUTH THE PROPERTY OF STR CALL TO SECRETARY OF SECRETARY OF STR CALL TO SECRETARY OF SECRET
apacity/Title:OWNER	a 2 INAMO SECRETARY OF STA 62/20/2009 05
(see instruction # 8 on back of form)	G CK; 191 CT: 158018 BH: 1

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