

227

**FILED EFFECTIVE**

# **CERTIFICATE OF ASSUMED BUSINESS NAME**

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2016 JAN 13 PM 3:58

SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

CC Fugative Recovery Agents

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Ramiro Villa 1425 Missoula Way Caldwell ID 83605

(Name) (Address)

Javier Venegas Villa 1425 Missoula Way Caldwell ID 83605

(Name) (Address)

(Name) (Address)

(Name) (Address)

3. The general type of business transacted under the assumed business name is:

☐ Retail Trade  
☒ Services

☐ Construction  
☐ Manufacturing

☐ Transportation and Public Utilities  
☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Ramiro Villa

(Name)

1425 Missoula Way

(Address)

Caldwell ID 83605

(City) (State) (Zipcode)

5. Name and address for this acknowledgment copy is (if other than # 4):

Ramiro Villa

(Name)

1425 Missoula Way

(Address)

Caldwell ID 83605

(City) (State) (Zipcode)

Printed Name: Ramiro Villa

Signature: [Signature]

Printed Name: Javier Venegas Villa

Signature: [Signature]

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Rev. 08/2015

Secretary of State use only

IDAHO SECRETARY OF STATE

01/14/2016 05:00

CK:3518734 CT:172099 BH:1508661

1@ 25.00 = 25.00 ASSUM NAME #2

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