

Signature:\_\_

Printed Name:

Capacity: りいいい

(see instruction #8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME



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

DEC 10 11 48 AM \*01

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRE STATE

The true name(s) and <u>business</u> address(es) of the business under the assumed business name:	e entity or individual(s) doing
<u>Name</u>	Complete Address
John Whygate	5723 S. Fruithill Bow IDE
The general type of business transacted under the	ne assumed business name is:
<ul> <li>☐ Retail Trade</li> <li>☐ Wholesale Trade</li> <li>☐ Construction</li> <li>☐ Agriculture</li> </ul>	
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson
5723 S Exillish	Basement West PO Box 83720
BOTH ITD 83709	Boise ID 83720-0080 208 334-2301
. Name and address for this acknowledgment copy is (if other than #4 above):	Phone number (optional):

Corprormstation formstation Revised 01/2001

IDAHO SECRETARY OF STATE
12/10/2001 05:00
CK: 5985 CT: 154457 BH: 433681
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