

Capacity/Title:

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

**FILED EFFECTIVE** 12 APR 12 AM 8:53

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

SECRETARY OF STATE STATE OF IDAHO

## Please type or print legibly. Instructions are included on back of application.

	Bridger C	ustom Amn	70	
bus	The true name(s) and <u>business</u> address(e business under the assumed business nat <u>Name</u> Jason Murrell		, , , , , , , , , , , , , , , , , , , ,	
3. The	general type of business transacted u Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	n and Put		
Jaso	e name and address to which future respondence should be addressed; on Murrell 25 n. sunrise ct.		Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
	me and address for this acknowledgme by is (if other than # 4 above):	nt		
anature:	Jason Munoll		Secretary of State use only	
	une: Jason Murrell			
	Title: owner			
gnature:			IDAHO SECRETARY OF STATE 04/12/2012 05:00	
	nted Name:		CK: 19445895754 CT: 158010 BH: 13194 1 0 25.00 = 25.00 ASSUM NAME N :	

D154775