

Capacity/Title:

(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.

Please type or print legibly.
NOTE: See instructions on reverse before filing.



NOTE: See Instructions on teverse perore ming.	OF IDAHO
. The assumed business name which the undersigned	l use(s) in the transaction of
business is: GRACE OF GOD	ministries
	Complete Address OF N Handing Stanting
. The general type of business transacted under the a	ssumed business name is:
Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: 1305 N Harding State 83206	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	Phone number (optional): 208_353-6/14
	Secretary of State use only
gnature: Jol Holling Survey	

IDAHO SECRETARY OF STATE

94/96/2097 95:99

CK: 2763 CT: 158618 BH: 1945253
1 8 25.09 = 25.00 ASSUM NAME # 2

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