

CERTIFICATE OF ASSUMED BUSINESS NAME

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

02 SEP 20 PM 3: 05

STATE OF IDAHO

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

(see instruction # 8 on back of form)

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address			
			RICHARD T. PAUL
The general type of business transacted un	der the a	assumed business name is:	
Retail Trade Transportation	and Put	olic Utilities	
 Wholesale Trade ☐ Construction X Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 		Submit Certificate of Assumed Business Name and \$20.00 fee to:	
The name and address to which future correspondence should be addressed:		Secretary of State 700 West Jefferson Basement West	
RICHARD T. PAUL		PO Box 83720	
<u> </u>		Boise ID 83720-0080 208 334-2301	
5. Name and address for this acknowledgme	ent	Phone number (optional):	
CODY is (if other than # 4 above).		(208) 922-9159	
		Secretary of State use only	
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nature: Michael J. Paul	copylomstabn formstabn p65 Revised 09/2002		
(eignature required) nted Name: RICHARD T. PAUL	forms\abn forms\ Revised 09/2002	IDAHO SECRETARY OF STATE 99/20/2002 05:00	
pacity/Title: Owner	pyforn Rev	CK: CASH CT: 158010 BH: 4894 1 0 20.00 = 20.00 ASSUM NAME	

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