



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

07 JUN 11 PM 4:05

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

Bromgard & Associates

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
<u>Justin Bromgard</u>	<u>1065 S. Allante Pl. Boise, ID 83709</u>
_____	_____
_____	_____

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

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

Justin Bromgard
1065 S. Allante Pl.
Boise, ID 83709

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

Phone number (optional):

208-283-6975

Signature: _____

(signature required)

Printed Name: _____

Justin Bromgard

Capacity/Title: _____

Partner / Owner

(see instruction # 8 on back of form)

Secretary of State use only

D112262

IDAHO SECRETARY OF STATE
 06/11/2007 05:00
 CK: 11/5179 CT: 172099 BH: 1059395
 1 @ 25.00 = 25.00 ASSUM NAME # 2