

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 FEB 26 AM 8: 25

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

2. The true name(s) and business address(es) business under the assumed business name	
Name	Complete Address
LARRY D. Hllen	5103 ITVING
	Boke ID 83706
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction	ler the assumed business name is: and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
K.C. Tool Supply 5103 FruNG Boise Td 83706	(208) 334-2301
5. Name and address for this acknowledgmer copy is (f other than # 4 above):	<b>it</b>
	Secretary of State use only
gnature: Parrel Allu-	1DAHO SECRETARY OF STATE  1DAHO SECRETARY OF STATE  22/26/2019 95:200  CK: 2986 CT: 245364 BH: 1299653
apacity/Title: OWNEr  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  @2/26/2010 05:00  CK: 2986 CT: 245384 BH: 1299875  1 @ 25.08 = 25.00 ASSUM NAME I

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