CERTIFICATE OF ASSUMED BUSINESS N. (Please type or print legibly. See Instructions on reverse.)	AME
To the SECRETARY OF STATE, STATE OF IDAHO	BM

	an a language and business addresses	that antiburar	· individual(s) doino
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address		
,	L. Randall Hole	610 One	da, Rupet, 108325
3.	The general type of business transacted uniquestory there that apply)	nder the assum	ed business name is:
	Retail Trade		
4.	The tente of the contract of t	Finen	
4.	Services Construction The name and address to which future correspondence should be addressed: LiRaudall Hole 610 Ouerda	Finen Minin	ce, insurance, and Real Est
	Services Construction The name and address to which future correspondence should be addressed: LiRaudall Hale	Finen Minin	ce, insurance, and Real Est prional): Submit Certificate of Assumed Business

(see Instruction = 5 on back of form)

1 8 20.00 = 20.00 ASSUM NAME # 2

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