

Printed Name:

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.

08 DEC -8 AM 9: 31 SECRETARY OF STATE STATE OF IDAHO

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

business under the assumed business name:	the entity or individual(s) doing
Waller Enterprises, Inc.	Complete Address 3970 Forest Hill Lune
C58812	Lewiston, ID 83501
The general type of business transacted under	the assumed business name is:
Retail Trade Transportation an	d Public Utilities
Wholesale Trade Construction	
Services Agriculture Manufacturing Mining	Submit Certificate of Assumed Business
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future	Idaho Secretary of State
correspondence should be addressed:	450 N 4th Street PO Box 83720
Forest Auto FTruck Parts	Boise ID 83720-0080
3970 Forest Hill Lane	(208) 334-2301
LW18701(10 83501	
Name and address for this acknowledgment copy is (if other than #4 above):	

D12679