

## 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.

## Please type or print legibly. Instructions are included on back of application.

2013 SEP 12 AM 10: 48

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the business is:     Bradley's Insurance	e undersigned use(s) in the transaction of
The true name(s) and <u>business</u> address business under the assumed business     Name     Brolachan, Inc.	ss(es) of the entity or individual(s) doing name:  Complete Address  1484 Otts Basin Road, Sagle, ID 83860
(0199659)	
3. The general type of business transacte  Retail Trade Transport Wholesale Trade Services Agricultui	ation and Public Utilities tion
☐ Manufacturing ☐ Mining  Finance, Insurance, and Real Es	Submit Certificate of Assumed Business
<ol> <li>The name and address to which future correspondence should be addressed: Kathleen A. Bradley</li> </ol>	450 North 4th Street PO Box 83720
1484 Otts Basin Road Sagle, ID 83860	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledge copy is (if other than # 4 above): Same As #4	yment
Signature Sheller a Brall	Secretary of State use only
Signature: Mathleen A Bradley	4
Capacity/Title: Agent/Co-Owner	
Signature: / sex // Znadly	
Printed Name: Jesse J Bradley	IDAHO SECRETARY OF STATE
Capacity/Title: Co-Owner	Ø9/12/2013 Ø5:00 CK: 1546772 CT: 172099 RH: 1389764 1 8 25.00 = 25.00 ASSUM NAME # 3

abr. pmd Rev. 07/2010