

## **CERTIFICATE OF** ASSUMED BUSINESS NAME OF APRIL AM 8: 56 Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. SECRETARY OF STATE

STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

business is:  DDD Demolition D	ig Dispo	se	-
2. The true name(s) and business address(es) of business under the assumed business name:  Name  Michael McGehee  Serenity McGehee  3. The general type of business transacted unde  Retail Trade  Wholesale Trade  Agriculture  Manufacturing  Mining  Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Michael McGehee  7518 missouri ave. Rathdrum, ID 83858	7518 or the as	Complete Address missouri ave. Rathdrum, ID 83858  surned business name is: ic Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301  Phone number (optional):	
copy is (If other than # 4 above):	ſ	(208)262-1723  Secretary of State use only	<u></u>
Printed Name: Michael mcGehee  Capacity/Title: May Make (see instruction # 8 on back of form)	g-'conyformeten formeten, p85 Revieed 04/2003	IDAHO SECRETARY OF 04/11/2007	1: 1046 SUM NAM