

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2014 AUG 18 AM 9: 42

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

The true name(s) and <u>business</u> address(es business under the assumed business name	
<u>Name</u>	Complete Address
Lisa Phillips	P.O. Box 404, 509 S. 4th Street Bellevue ID 83313
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Lisa Phillips	Submit Certificate of Assumed Business
P.O. Box 404, 509 S. 4th Street	208 334-2301
Believue, ID 83313	<u> </u>
Name and address for this acknowledgme copy is (if other than # 4 above):	nt

IDAHO SECRETARY OF STATE
08/18/2014 05:00
CK:1078 CT:84363 BH:1437676

1@ 25.00 = 25.00 ASSUM NAME #2

D113aa8

Printed Name: Lisa Phillips

Capacity/Title: owner

Printed Name:

Signature: \_\_\_\_\_

Capacity/Title:\_