

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

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

Secretary of State BEILEBREFECTIVE

www.idsos.state.id.us/

2825 MUG -9 MH 9: 11

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

Printed Name: CHARLES L RICHMOND

(see instruction # 8 on back of form)

Capacity/Title: OWNER

The true name(s) and business address(es	
<ul> <li>The true name(s) and <u>business</u> address(es business under the assumed business name</li> </ul>	
<u>Name</u>	Complete Address
CHARLES L RICHMOND	2952 SHOSHONE AVE
	ATHOL 10 83801
Ti the state of th	ador the annumed business name is:
The general type of business transacted un	nder the assumed business name is.
Retail Trade Transportation	n and Public Utilities
Tretail Hade	
	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
	Secretary of State
The name and address to which future correspondence should be addressed:	700 West Jefferson
	Basement West
CHUCK'S HAROWOOD FLOORS	PO Box 83720
	Boise ID 83720-0080
	1
2952 SHOSHONE AVE	208 334-2301
	208 334-2301
ATHOL ID 83801	
1952 SHOSHONE AVE ATHOL ID 83801  Name and address for this acknowledgment	ent ' Phone number (optional)
ATHOL ID 83801	
1952 SHOSHONE AVE ATHOL ID 8380/ Name and address for this acknowledgme	Phone number (optional).  1-208-65/-3930
1952 SHOSHONE AVE ATHOL ID 83801  Name and address for this acknowledgme	ent ' Phone number (optional)