

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

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

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

(see instruction # 8 on back of form)

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SECTION OF SIME STATE OF DULC

U-COPY & PRINT	
The true name(s) and business address(es) business under the assumed business name Name     VERL HANSEN  JULIE HANSEN	· · · · · · · · · · · · · · · · · · ·
Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  VERL HANSEN	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
36 WEST 300 NORTH PRESTON, ID 83263  5. Name and address for this acknowledgmen	208 334-2301
COPY IS (if other than # 4 above): TRAVIS M. KUNZ, CPA	208-852-2344
1942 N. MAIN ST. PRESTON, ID 83263	Secretary of State use only
Signature: Dell Tocuber  (signature required)  Printed Name: VERL HANSEN	IDAHO SECRETARY OF STATE  10/10/2006 05:  CK: 954 CT: 205292 BH: 979  CK: 954 CT: 205292 BH: 979
Capacity/Title: OWNER	10/10/2006 05: CK: 954 CT: 205292 BH: 979 1 8 25.00 = 25.00 ASSUM NA