

## CERTIFICATE OF ASSUMED BUSINESS NAME

## **FILED EFFECTIVE**

Pursuant to Section 53-504, Idaho Code, the undersigned 2012 OCT 18 AM 9: 30 submits for filing a certificate of Assumed Business Name.

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

SECRETARY OF STATE STATE OF IDAHO

	SIAIE UT WATU
The assumed business name which the business is:	e undersigned use(s) in the transaction of
ALPINE MOBILITY	
ALPINE MOBILITY	
The true name(s) and business address	s(es) of the entity or individual(s) doing
business under the assumed business	name:
<u>Name</u>	Complete Address
ALPINE MOBILITY, LLC	4715 E. 200 N. RIGBY IDAHO 83442
(W11820B)	
	d under the accumed business name is:
The general type of business transacted	
	ation and Public Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Est	tate Name and \$25.00 fee to:
. The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street PO Box 83720
KRISTINE BOREN-PARKER	Boise ID 83720-0080
4715 E. 200 N. RIGBY ID 83442	208 334-2301
. Name and address for this acknowledge	ment
COPY IS (if other than # 4 above).	
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	Secretary of State use only
ature: Versture Foren-Parket	
ed Name: KRISTINE BOREN-PARKER	
acity/Title: OWNER / MANAGER	
ature:	IDAHO SECRETARY OF STATE 10/18/2012 05:0
ted Name:	ry, 2002 ct. 275202 Du. 124410
acity/Title:	

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