

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

09 APR -2 AM 8= 15

SECRETARY

	STATE OF IDAHO
1. The assumed business name which the undersignate business is:    RUCKING	ed use(s) in the transaction of
2. The true name(s) and business address(es) of the business under the assumed business name:  Name  CHABLES A. (CHUCK) JONES P.O.	Complete Address
	MAH, ID 83536
Retail Trade Transportation and Pour Wholesale Trade Construction  Services Agriculture	ublic Utilities
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  CHUCK TONES  P.O. Box 1418  LAMIAH TD. 83536	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208-816-1563
	Secretary of State use only
Section 1980	
nature:	

Capacity/Title: <u>OWNER</u>

(see instruction # 8 on back of form)