| CERTIFICA | TE OF NESS NAME ho Code, the undersigned Assumed Business Name FILED EFFECTIVE |
|---|--|
| ASSUMED BUSI | NESS NAME 'LED EFER |
| Pursuant to Section 53-504, Ida | NESS NAME ho Code, the undersigned Assumed Business Name. egibly. |
| submits for filing a certificate of Assumed Business Name. | |
| Please type or print legibly. | |
| NOTE: See instructions on reverse before filing. | |
| "DAHO"E | |
| The assumed business name which the undersigned use(s) in the transaction of business is: | |
| | |
| Pace Property Management | |
| 2. The true name(s) and business address(es) of the entity or individual(s) doing | |
| business under the assumed business name: | |
| Name | Complete Address |
| Marnae Burum | 1850 Liteurest St. |
| | BOISP TO 83717 |
| | |
| | |
| The general type of business transacted under the assumed business name is: | |
| Retail Trade Transportation and Public Utilities | |
| Aransportation and Fubic Officies | |
| | |
| Manufacturing Minin | Submit Certificate of |
| Finance, Insurance, and Rea | |
| | |
| The name and address to which fu correspondence should be address | |
| | Basement West |
| 1950 Liteurest st. | PO Box 83720 |
| EUISE, ID 83712 | Boise ID 83720-0080 |
| | 208 334-2301 |
| 5. Name and address for this acknow | viedgment Phone number (optional): |
| COPY IS (if other than # 4 above). | 6. 20 |
| | (UB) 830-3683 |
| | |
| | Secretary of State use only |
| | |
| Signature: NOULOH | |
| (stgrifture regard) | IDANO SECRETARY OF STATE |
| | |
| Capacity/Title: <u>Wher</u> | IDANO SECRETARY OF STATE |
| (see instruction # 8 on back of form) | • 07/20/2004 05:00 CK: 3113 CT: 150010 BH: 756447 |
| | 1 0 25.00 = 25.00 ASSUM NAME # 2 |

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