

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 FEB 19 AM 9: 21

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

KN	wi Loco		
The true name(s) and business address(e business under the assumed business name	me:	Complete Address	
Douglas James Burch	871 Grace Dr Twin Falls, ID 83301		
Floyd Eugene Turley	661 Ridgeway Twin Falls, ID 83301		
Jacob Chet Detweiler	4150 North 2700 East Twin Falls, ID 833		lis, ID 83301
The general type of business transacted u  ✓ Retail Trade ☐ Transportatio  ✓ Wholesale Trade ☐ Construction	n and Pul		nie 13.
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future		Submit Certificate Assumed Business Name and \$25.00	s fee to:
correspondence should be addressed:  Douglas Burch		450 N 4th Street PO Box 83720 Boise ID 83720-0080	)
871 Grace Dr West		(208) 334-2301	
Twin Falls, ID 83301			
Name and address for this acknowledgm copy is (if other than # 4 above):	ent		
		Secretary of State	e use only
ture: (signature required)	g/corpyformstatin formstatin,p65 Revised 04/2003		