

Capacity/Title:

(see instruction # 8 on back of form)

## **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.

SECRETURE OF STATE STATE OF IDAHO

1. The assumed business name which the unde business is:	
	Complete Address  RIDGEDALE LT.  NAMPA, TD. 23686
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  The name and address to which future correspondence should be addressed:	
NAMPA, TD. 23586  5. Name and address for this acknowledgment copy is (if other than # 4 above):  Same	Phone number (optional): (203) リレニュタティ
Signature: (ignature required)  Printed Name: J. JAY WHIJERY	IDAHO SECRETARY OF STATE    IDAHO SECRETARY OF STATE   IDAHO SECRETARY OF S

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