

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2014 MAY 14 AM 9: 12

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

SECRETARY OF STATE STATE OF TEXHO

business under the assumed business	s(es) of the entity or individual(s) doing name:
<u>Name</u>	Complete Address
JOANNE ELLIOTT	2850 N PLAZA RD
	EMMETT, ID 83617
3. The general type of business transacte	
Retail Trade Transporta Wholesale Trade Construct Services Agricultur Manufacturing Mining Finance, Insurance, and Real Es	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed:     2850 N PLAZA RD     EMMETT, ID 83617	l Secretary or State
<ol> <li>Name and address for this acknowledged copy is (if other than #4 above):</li> <li>KEY BANK</li> <li>1024 S WASHINGTON AVE</li> </ol>	yment
<del></del>	
gnature: JOANNE ELLIOTT  apacity/Title: OWNER	Secretary of State use only  IDANO SECRETARY OF STATE  05/14/2014 05:00  CK: 26123312 CT: 296864 BH: 1

716 1@ 25.00 = 25.00 ASSUM NAME #2

171210

Signature: \_\_\_\_

Capacity/Title:\_

Printed Name: \_\_\_\_\_