

Printed Name:

Capacity/Title: 04

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned UN - 2 AM 9: 45 submits for filing a certificate of Assumed Business Name.

Please type or print legibly. NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: TURNER HOUSE 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 LARRY ROGERS 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Name and \$25.00 fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Secretary of State correspondence should be addressed: 700 West Jefferson **Basement West** PO Box 83720 Boise ID 83720-0080 HASKETT 208 334-2301 HOME ID 5. Name and address for this acknowledgment Phone number (optional): CODY IS (if other than # 4 above). Secretary of State use only 016455 Signature:

g.kco.pMormstabn formstabn. Revised04/2003

IDAHO SECRETARY OF STATE

96/92/2006 95:00

CK: 93 CT: 158010 BH: 957880
1 0 25.00 = 25.00 ASSUM NAME # 2