

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

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

2006 JUL 10 AM 9:01

Please type or print legibly. NOTE: See instructions on reverse before filing.

A A Bail Bonds	
The true name(s) and business address(es) of business under the assumed business name:  Name  Hometown Bail Bonds LLC  (W 47410)	the entity or individual(s) doing  Complete Address  909 N. Cole Rd. Boise, Idaho 83704
The general type of business transacted under  Retail Trade Transportation and Wholesale Trade Construction	
<ul><li>☐ Services</li><li>☐ Manufacturing</li><li>☐ Mining</li><li>✓ Finance, Insurance, and Real Estate</li></ul>	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
The name and address to which future correspondence should be addressed:  Hometown Bail Bonds LLC dba A A Bail Bonds	Secretary of State 700 West Jefferson Basement West PO Box 83720
909 N. Cole Rd Boise, Idaho 83704	Boise ID 83720-0080 208 334-2301
. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208-321-4645
	Secretary of State use only

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IDAHO SECRETARY OF STATE

07/10/2006 05:00

CK: 460 CT: 202229 BH: 964276
1 @ 25.00 = 25.00 ASSUM NAME # 2

Signature: (signature required)

Printed Name: \_\_\_

Sandra Cain

Member Capacity/Title:\_\_\_\_

(see instruction # 8 on back of form)