

Capacity/Title: OWNER

(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.

FILED EFFECTIVE

03 JUL 16 AM 10: 06

SECRETARY OF STATE

De7178

	STATE OF IDAHO
1. The assumed business name which the undersig	ned use(s) in the transaction of
business is:	_
IS AND STABLES	
The true name(s) and <u>business</u> address(es) of the business under the assumed business name:	ne entity or individual(s) doing
Name	Complete Address
STAN PUCKETT	1305 TROUT RD.
JACKIE STEWART	EAGLE IDAHO
	83616
3. The general type of business transacted under the	ne assumed business name is:
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: TSLAND STABLES 1305 TROUT RD EAGLE TDAHO 83616 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
	Secretary of State use only
Signature: Dignature required Puckett Printed Name: STAN Puckett One of the Title of the Puckett	IDAHO SECRETARY OF STATE 7/16/2003 05:00 CK: 3395 CT: 158010 BH: 691290 1 0 25:00 = 25:00 ASSUM MAME # 2