Printed Name:

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. TID JUL 00 AT 9:33

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

Melanie Fears	Coex d'Alege ID
l'lelanie tears	Coex d'Alene ID
	Coere d/Hene ID
	0-2001
•	45814
The general type of business transacted und	der the assumed business name is:
	and Public Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business Name and \$25.00 fee to:
☐ Finance, Insurance, and Real Estate	Wallie and \$25.00 loc to.
The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson  Basement West
Melanie Fears	PO Box 83720
1150 XI THIST	Boise ID 83720-0080
Coes d Alere ID 53	SSI4 208 334-2301
Nome and address for this asknowledges	nt Phone number (optional):
Name and address for this acknowledgment copy is (if other than # 4 above):	205-114-9558
COPY 13 (if other than # 4 above).	

IDAHO SECRETARY OF STATE

97/30/2007 05:00

CK: 1094 CT: 158010 BH: 1067896
1 8 25.00 = 25.00 ASSUM NAME # 2