

## CERTIFICATE OF ASSUMED BUSINESS NAME

2014 NOV 24 AM 9: 5

SECRETARY OF STATE STATE OF IDAHO

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

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

	Andersen Equipment	
2.	The true name(s) and <u>business</u> address(es business under the assumed business nam Name  Joseph B. Andersen	
		Ot. Maries, Id. 00001
3.	The general type of business transacted until Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
4.	The name and address to which future correspondence should be addressed:  Joseph Andersen  12825 E. Rosewood Dr.  St. Maries, Id. 83861	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	nt
0	On the Contract	Secretary of State use only  IDANO SECRETARY OF STATE
U	ture: )	11/24/2014 05:00
	city/Title: Owner/Operator	CK:8055 CT:158010 BH:1450622 16 25.00 = 25.00 ASSUM NAME #2
-	ture:	TG 20.00 - 23.00 ABSOR WARE TO
Printe	ed Name:city/Title:	D175138