(see instruction # 8 on back of form)



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 08 NOV -4 PM 3: 22

Please type or print legibly. NOTE: See instructions on reverse before filing. SECRETARY OF STATE STATE OF IDAHO

The true name(s) and business address(e business under the assumed business name to business address.	es) of the entity or individual(s) doing arme:
Name	Complete Address
Tim Arnold Inc	4103 Overland Rd.
<u>C 139623</u>	Boise. The 83705
3. The general type of business transacted t	under the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future	Submit Certificate of Assumed Business Name and \$25.00 fee to:
	Idaho Secretary of State
correspondence should be addressed:	450 N 4th Street PO Box 83720 Boise ID 83720-0080
Correspondence should be addressed: Tim Arnold 4103 Overland Rd Boise. Id. 83705	PO Box 83720
Tim Arnold 4103 Overland Rd	PO Box 83720 Boise ID 83720-0080 (208) 334-2301
Tim Arnold 4103 Overland Rd Boise. Id. \$3705 5. Name and address for this acknowledgm	PO Box 83720 Boise ID 83720-0080 (208) 334-2301

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