9/21/2012



## **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.

Please type or print legibly. Instructions are included on back of application. 2014 MAR -6 AM 8:55

Instructions are included on	<b>-</b>		)
The assumed business name w business is:	hich the undersigned u	se(s) in the transaction of	W.
Fixin Dixon General Services			
The true name(s) and business business under the assumed business.	• •	y or individual(s) doing	
Name	<u>(</u>	Complete Address	
Kevin Dixon	111 Hope St	reet Kootenai Idaho 83840	
Wholesale Trade Co Services Ag Manufacturing Mi	nnsportation and Public onstruction griculture ning	Submit Certificate of Assumed Business	
Finance, Insurance, and F  4. The name and address to which	n future	Name and \$25.00 fee to:  Secretary of State	
correspondence should be addr	essed:	450 North 4th Street	
Kevin Dixon		PO Box 83720 Boise ID 83720-0080	)
P.o. Box 631		208 334-2301	·
Ponderay Idaho 83852  5. Name and address for this acknowledge to the second se	onedo domento "	<u> </u>	<u> </u>
CODY is (if other than # 4 above):	owough to it		
Signature: Kwir Ri	22	Secretary of State use only	
Printed Name: Kevin Dixon			
Capacity/Title: Owner			
Signature: Keven Dek	07/		
Printed Name: Keun Dixo			
Capacity/Title: OWNER	•	IDAHO SECRETARY OF STATE	_
1/2012	abin.pmd Rev. 07/2010	03/06/2014 05:0 CK: 285510385836 CT: 293885 BH: 1 1 @ 25.00 = 25.00 ASSUM MANE	1413824 1413824 1 8 2