

## 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.

H 1941.0 19712: 33

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

STATE OF IDAHO

2. The true name(s) and	business address(es) of the ssumed business name:	e entity or individual(s) doing
Name	ssumed business name:	Complete Address
Bulla	Pates au	and the second of the second
711112	590	Chinden Blue Garden Pity
		837
3. The general type of b	usiness transacted under th	e assumed business name is:
D-7		
Retail Trade	☐ Transportation and F	Public Utilities
☐ Wholesale Trad	· <b>=</b>	
☐ Services	Agriculture	Submit Certificate of
Manufacturing	Mining	Assumed Business
☐ Finance, Insura	nce, and Real Estate	Name and \$20.00 fee to:
4. The name and address	s to which future	Secretary of State
correspondence shou	•	700 West Jefferson
2.1.00		Basement West
Kicky C. Pat		PO Box 83720
340/ Chinder	Blu.	Boise ID 83720-0080
Gorden Pity	Id. 83714	208 334-2301
5. Name and address for	or this acknowledgment	Phone number (optional):
COPY IS (if other than # 4 ab	ove):	(208) 336-1903
		<u> </u>
		Secretary of State use only
	gd uq	
nature:	(political)	
nted Name: Ricky	Copylomister formstary p65	
~ /	forms Revis	
pacity/Title: Owner	idos	IDANO SECRETARY OF STAT

IDAHO SECRETARY OF STATE
01/30/2003 05:00
CK: CASH CT: 158010 BH: 668050
1 0 20.00 = 26.00 ASSUM NAME # 2

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