

## 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.

2016 FEB 24 PM 1: 32 SECRETARY OF STATE STATE OF IDAHO

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

1. The assumed business name which the undersigned use(s) in the transaction of business is:  GUENNOWSTRUCTON	
business under the assumed busines <u>Name</u>	ess(es) of the entity or individual(s) doing ss name:  Complete Address  1327 Wywwo 57, #102  Botse, 10, 837(3
	ture Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed wichard Glewn, Sr. 1327 Wills wood St. #1, Boise, IN 83713	450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowle copy is (if other than # 4 above):  Signature:	Secretary of State use only  IDANO SECRETARY OF STATE
Printed Name: MICHAEL G-LENN,	02/24/2016 05:00 CK:CASH CT:158010 BH:1515187
Capacity/Title: 6000 FCR	10 25.00 = 25.00 ASSUM NAME #:
Signature:	l l

D184681

Printed Name:

Capacity/Title: