



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

08 DEC 18 AM 10:32

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Circle A Enterprises

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Everett T Acor, Jr

636 Stevens, ID Falls, ID 83401

Ruth P Acor

636 Stevens, ID Falls, ID 83401

Clyde P Acor

3825 N Ammon Rd, ID Falls, ID 83401

3. The general type of business transacted under the assumed business name is:



Retail Trade



Transportation and Public Utilities



Wholesale Trade



Construction



Services



Agriculture



Manufacturing



Mining



Finance, Insurance, and Real Estate

4. The name and address to which future correspondence should be addressed:

Circle A Enterprises

1388 Iowa Rd

IDAHO Falls, ID 83401

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature: Ruth P Acor

(signature required)

Printed Name: Ruth P Acor

Capacity/Title: Owner

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

Secretary of State use only

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IDAHO SECRETARY OF STATE
12/18/2008 05:00
CK: MD CK # CT: 88547 BH: 1148862
1 @ 25.00 = 25.00 ASSUM NAME # 2