

## **CERTIFICATE OF** ASSUMED BUSINESS NAME **FILED EFFECTIVE**

Pursuant to Section 53-504, Idaho Code, the undersigned 14 JUL 30 Pil 1: 14

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

The true name(s) and <u>business</u> address; business under the assumed business n	· ,     •
<u>Name</u>	Complete Address
Vincent Stailey	131 NW Bowman Lane Mountain Home, ID 83647
Wholesale Trade Construction	tion and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: 131 NW Bowman Lane	Secretary of State 450 North 4th Street PO Box 83720
Mountain Home, ID 83647	Boise ID 83720-0080 208 334-2301
Name and address for this acknowledge copy is (if other than # 4 above):	nent

CK:17059086738 CT:158010 BH:1435335 10 25.00 = 25.00 ASSUM NAME #2

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Printed Name: Capacity/Title:

Capacity/Title: Owner / Operator

Signature: