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| CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, t submits for filing a certificate of Assumed B <u>Please type or print legibly.</u> NOTE: See instructions on reverse befor | S NAME he undersigned Business Name. SECON |
| business is: <u>MOUNTAIN</u> <u>HIGH</u> <u>WTERIORS</u> <u>AND</u> <u>DESIGN</u> 2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: <u>Name</u> <u>Complete Address</u> | |
| MCHARA | |
| Agriculture Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: MCHAE MORE MSRIDHO, ID. 836472 | Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| Name and address for this acknowledgmer copy is (if other than # 4 above): | nt Phone number (optional): (20x)884-2417 |
| Signature: Printed Name: Capacity: (see instruction # 8 on back of form) | Secretary of State use only IDANO SECRETARY OF STATE 06/04/2001 69:00 CK: CASH CT: 147201 BH: 400077 1 2 20.00 = 20.00 ASSUM NAME # 2 DX15799 |