

Capacity/Title:_

CERTIFICATE OF ASSUMED BUSINESS NAME

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

CONC. 1884	CERTIFICATE OF	F 👙
	ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed E	the undersigned 49
	Please type or print legibly. Instructions are included on back of app	oplication.
	The assumed business name which the un ousiness is:	Indersigned use(s) in the transaction of
	ADDA	5A Towning
	The true name(s) and <u>business</u> address(esbusiness under the assumed business nam <u>Name</u> M.H.L. HALMAN	
3. 1	The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
(- -	The name and address to which future correspondence should be addressed: Mitch Hoffman Bigwood Body and Paint 714 N Main St., Bellevue, ID 83313	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. N	Name and address for this acknowledgmer copy is (if other than # 4 above):	ent
-	M.t.h.l.	Secretary of State use only
Signatu		
Printed	Name: Mitch Hoffman (`	
Capaci	ity/Title;_Owner	
Signatu	ure:	IDAHO SECRETARY OF STATE
Printed Name:		95/15/2012 95:99 CK: 11451 CT: 278397 BH: 1324176 1 8 25.98 = 25.88 ASSUM NAME # 2

abn pmd Rev. 07/2010

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