

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

Full Circle Recovery

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

Name

Complete Address

Ricky L. Rice

1801 Shoup St. Salmon Id. 83467

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

☐

Retail Trade

☐

Manufacturing

☐

Transportation and Public Utilities

☐

Wholesale Trade

☐

Agriculture

☐

Finance, Insurance, and Real Estate

☒

Services

☐

Construction

☐

Mining

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

Full Circle Recovery

1801 Shoup St.

Salmon Idaho 83467

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

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

Signature: Ricky L. Rice

Printed Name: Ricky L. Rice

Capacity: Owner

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE
Secretary of State use only
05/29/1998 09:00
EX: 1869 CT: 99365 BH: 114948

1 @ 20.00 = 20.00 ASSUM NAME

D 15364



FILED

MAY 29 AM 9: SECRETARY OF STATE STATE OF IDAHO