

227



09 JUL 29 AM 8:17

SECRETARY OF STATE
STATE OF IDAHO

NOTE: See instructions on reverse before filing.

- A.O.C.**

- Name _____

Complete Address

PO BOX 660

HAYDEN, ID 83835

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |
- Submit
Assume
Name a

- SKYLER SHANNON**

2476 SPARROW LOOP

POST FALLS, ID 83854

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

**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

Signature:

Printed Name:

SKYLER SHANNON

Capacity/Title:**OWNER**

(see instruction # 8 on back of form)

Prescribed by:
Prescribed by:

IDAHO SECRETARY OF STATE
07/29/2009 05:00
CK: 127 CT: 239229 DN: 1180691
1 @ 25.00 = 25.00 ASSUM NAME # 2

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