

Signature:

Printed Name:

(see instruction # 8 on back of form)

Capacity/Title:

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

## FILED EFFECTIVE

05 SEP -2 PM 3: 51

SECRETAL OF STATE

## NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: INDEPENDENT CONTRACTORS 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address X) III I HW 10747 INLUING CS DI 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Name and \$25.00 fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Secretary of State correspondence should be addressed: 700 West Jefferson **Basement West** 10747 IKUING CX PO Box 83720 Boise ID 83720-0080 BOISE 208 334-2301 5. Name and address for this acknowledgment Phone number (optional): CODY is (if other than #4 above): Secretary of State use only

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