

## **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. NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

Capacity/Title: <u>OWNER</u>



1. The assumed business name which the undersigned business is:	
HI-TECH Product	5
<ol> <li>The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:</li> </ol>	
Name	Complete Address
DWAYNE Richards 1015	S. Birch ST.
JEroi	me, Idaho 83338
3. The general type of business transacted under the as	ssumed business name is:
Retail Trade Transportation and Pub	olic Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of Assumed Business
☐ Manufacturing ☐ Mining	Name and <b>\$25.00</b> fee to:
Finance, Insurance, and Real Estate	Constant of State
4. The name and address to which future	Secretary of State 700 West Jefferson
correspondence should be addressed:	Basement West
DWAYNE Richards	PO Box 83720 Boise ID 83720-0080
1015 S. Birch ST.	208 334-2301
Terome, Idaho 83338	
5. Name and address for this acknowledgment	Phone number (optional):
COPY is (if other than # 4 above):	
	Secretary of State use only
8	080181
tionature:	
Printed Name: Dwayne Richards	IDAHO SECRETARY OF STATE 09/20/2004 05:00
Frinted Name: Dwayne Richards	CK: 448848101980 CT: 158810 BH: 766861 1 8 25.00 = 25.00 ASSUM MAME # 2