

Capacity/Title:

## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

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

2014 JAN 28 PM 12: 29

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

SECRETARY OF STATE STATE OF IDAHO

The Adventure Foursquare Church	of Draper, UT
2. The true name(s) and <u>business</u> address business under the assumed business  Name  Adventure Church Meridian, Inc	
Finance, Insurance, and Real Es	Assumed Business tate Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  Adventure Church Meridian, Inc.  1339 E. Mastiff St.  Meridian, ID 83642	450 North 4th Street
5. Name and address for this acknowledge copy is (if other than # 4 above):	gment
hu l	Secretary of State use only
Printed Name: GPGG GLGSBY	_
Capacity/Title: PASPOR	TRAIN OF OPERADY OF CTATE
Signature: Printed Name:	IDAHO SECRETARY OF STATE  01/28/2014 05:00  CK: 1684664 CT: 172899 BH: 1487956 1 @ 25.00 = 25.00 ASSUM MANE # 2

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