

## 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.

10 APR 15 AM 8: 48

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the un	ndersigned use(s) in the transaction of
business is:  Moto d'Alene	Moto d'Alene
2. The true name(s) and business address(est business under the assumed business name Name  Patricia L CHADWICK  ———————————————————————————————————	, , , ,
3. The general type of business transacted up	nder the assumed business name is:
☐ Wholesale Trade ☐ Construction	on and Public Utilities
	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
Caer d'Alone ID 8384	(208) 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent
	Secretary of State use only
rinted Name: PATRICIA CONA JUNCE	IDAHO SECRETARY OF STATE  100 05 00 05 00 05 00 05 00 05 00 00 05 00 00
(see instruction # 8 on back of form)	