CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned FED -3 submits for filing a certificate of Assumed Business Name:

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

 The assumed business name which business is: 	the undersigned use(s) in the transaction of
<u>Cross Insuran</u>	ce-Manchoster
	ress(es) of the entity or individual(s) doing
	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed Cross Insurance—Mancher P.o. Box (388) Bangar, M. 04402	ed: 450 North 4th Street
5. Name and address for this acknowled copy is (if other than # 4 above):	edgment Secretary of State use only
Signature:	Secretary of State use only
Printed Name: Rouce M. Cross	
Capacity/Title: Charman	IDANO SECRETARY OF STATE
Signature:	Ø2/Ø3/2012 Ø5:ØØ CK: 1869 CT: 266628 BH: 1389894
	1 8 25.88 = 25.88 ASSUM HAME # 2

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Printed Name: _____

Capacity/Title: