Capacity/Title:



## **CERTIFICATE OF** ASSUMED BUSINESS NAME

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

<i></i>			
CERTIFICATE OF			2012 11.
	ASSUMED BUSINESS  Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bu	undersig	ned SECRA ARE
1	Please type or print legibly, nstructions are included on back of appl	ication.	OF OF STATE
	assumed business name which the undiness is:	lersigned	d use(s) in the transaction of
	Che	Tim	
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:			
	iothy Filgate	PO Box 5	866 Kelchum, ID 63340
**********			, , , , , , , , , , , , , , , , , , ,
4. The corr	general type of business transacted und Retail Trade	and Pub	•
	y is (if other than # 4 above):	l	
Ciamatuma.	12		Secretary of State use only
Signature:	arne: Timothy Filgate		
	Title: owner		
=			
Printed Name:			IDANO SECRETARY OF STATE

CK: 185 CT: 273159 BH: 1335413 1 0 25.00 = 25.00 ASSUM NAME N 2

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