

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 APR 30 AM 8: 40

Please type or print legibly.

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NOTE. See instructions on reverse peror	OTATE IN STAND
The assumed business name which the undopusiness is: Davis Rentals a	
Davis Mentals w	ing Supplies
· · · · · · · · · · · · · · · · · · ·	of the entity or individual(s) doing ne: Complete Address 760 W Center St Blackfoot, TR 83221
The general type of business transacted unc	der the assumed business name is:
	and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State
correspondence should be addressed: 760 w Center St Blackfoot, IC 8322	700 West Jefferson Basement West PO Box 83720
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 308 - 785 - 5969
760 W. Center St Blackfoot, Id 83221	Secretary of State use only
Signaturex Alban C Davis (signature required) Printed Name: MELVIN C DAVIS	IDAHO SECRETARY OF STATE 04/30/2014 05:00 05:00
Capacity/Title: Owner	16 25.00 = 25.00 ASSUM NAME #2
(see instruction # 8 on back of form)	ā

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