

## CERTIFICATE OF ASSUMED BUSINESS NAME

PILED EVEROTIVE

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

11 SEP -6 AM 9: 45

Please type or print legibly.

NOTE: See instructions on reverse before filing. SECRE BY OF STATE 1. The assumed business name which the undersigned use(s) in the transaction of business is: PARSONS HOUARIUM CARE 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name: EMERSON PARSONS 390 TALL AVE, RIGBY, ID, 83442 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture ★ Services Submit Certificate of Assumed Business Manufacturing Mining Name and \$25.00 fee to: Finance, Insurance, and Real Estate Secretary of State 4. The name and address to which future 700 West Jefferson correspondence should be addressed: Basement West PO Box 83720 EMERSON PARSONS Boise ID 83720-0080 390 TALL AVE 208 334-2301 RIGBY, ID 83442 Phone number (optional): 5. Name and address for this acknowledgment CODY IS (if other than # 4 above): 509-985-5646 AIG Secretary of State use only Signature: 4 0148937 Printed Name: Emerson Parsons

Capacity/Title: Owner (see instruction # 8 on back of form)

25.00 ASSUM NAME # 2