

Printed Name: _ ____

Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.



1. The assumed business name which the undersigned use(s) in the transaction Magic Valley Realty 2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1): Bryan Newberry P.O. Box 5583 Twin Falls, Idaho 83301 (Name) (Address) (Name) (Address) (Name) (Address) (Name) (Address) 3. The general type of business transacted under the assumed business name is: Retail Trade Construction Transportation and Public Utilities Wholesale Trade Agriculture Mining Services Manufacturing Kinance, Insurance, and Real Estate 4. Mailing address for future correspondence: 5. Name and address for this acknowledgment CODY IS (if other than # 4). Bryan Newberry (Name) P.O. Box 5583 (Address) (Address) Twin Falls 83303 Idaho (City) (State) (Zipcode) (City) (State) (Zipcode) Printed Name: Bryan Newberry Secretary of State use only Signature: 🔾 IDAHO SECRETARY OF STATE 12/17/2015 05:00 Printed Name: CK: 2734 CT: 85353 BH: 1504604 10.25.00 = 25.00 ASSUM NAME #2 Signature:

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