

Signature: _____

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

18		CERTIFIC	CATE OF	FILED ELLCOIVE	
HE			ED BUSINESS N 21, Part 8, Idaho Code.	IAME SECRETARY OF ON ONLY	
		inning ree, \$20.	oo.	STATEORGEST	
1.	The assumed business name which the undersigned use(s) in the transaction of business is				
	REBEL'S WELDING AND REPAIR				
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):				
	REBEL SH	HURTZ	24 E 300 S BURLEY	/ ID 83318	
	(Name)		(Address)		
	(Name)		(Address)		
	(Name)		(Address)		
	(Name)		(Address)		
3.	The general type of business transacted under the assumed business name is:				
	Retail 1		Construction	☐ Transportation and Public Utilities	
			Agriculture	Mining	
	⊠ Services ☐ Manufacturing			Finance, Insurance, and Real Estate	
4,	Mailing add	ress for future	correspondence:	5. Name and address for this acknowledgment copy is (if other than # 4):	
	REBEL SH	łURTZ		DL EVANS BANK:ATTN CORINNA PAZ	
	(Name)			(Name)	
	24 E 300 S	} 		108 E ELLIS ST	
	(Address) BURLEY	ID 83318		(Address) PAUL ID 83347	
	(City)		(State) (Zipcode)	(City) (State) (Zipcode)	
Pri	nted Name:	REBEL SHUR	TZ	Secretary of State use only	
Sig	nature:	All.			
Printed Name:				IDAHO SECRETARY OF STATE	
T (1)	nteu ivame.			03/30/2016 05:00 CK:29134 CT:158010 BH:1521272	
Signature:				10 25.00 = 25.00 ASSUM NAME #2	
Prii	nted Name:			7.5	
Signature:				()185535	

Rev. 08/2015