



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

2007 JUN 22 AM 8:33

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Emergency Supply Depot

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

JAMES ARMSTRONG

1250 East Elm Street

Pocatello, Idaho

83201

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| ☒ Retail Trade | ☐ Transportation and Public Utilities |
| ☒ Wholesale Trade | ☐ Construction |
| ☐ Services | ☐ Agriculture |
| ☐ Manufacturing | ☐ Mining |
| ☐ Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

EMERGENCY Supply Depot
1250 East Elm St
Pocatello Idaho 83201

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

5. Name and address for this acknowledgment copy is (if other than #4 above):

Phone number (optional):

208-221-3602

Signature

[Signature]
(signature required)

Printed Name: JAMES ARMSTRONG

Capacity/Title: OWNER

(see instruction #8 on back of form)

Secretary of State use only

9-1000 (Form 10-1-00) 10-1-00
Revised 04/00

IDAHO SECRETARY OF STATE
06/22/2007 05:00
CK: 1028 CT: 214666 BH: 1061713
1 @ 25.00 = 25.00 ASSUM NAME # 2

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