

Capacity/Title:

OWNET

(see instruction # 5 on back of form)

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.

Please type or print legibly.
NOTE: See instructions on reverse before filing.

| | The true name(s) and business address business under the assumed business name Name Raymond James Dawson | | ss(es) of the entity or individual(s) doing name: Complete Address 3505 Clistos RI Enneth, TT 83617 | |
|--|--|----------------------------------|--|--|
| <u>Raymo</u> | | | | |
| . The gene | eral type of business trans | sacted under the as | sumed business name is: | |
| P Notes | | sportation and Publ struction | ic Utilities | |
| ☐ Se | manus (m) | culture og | Submit Certificate of Assumed Business Name and \$25,00 fee to: | |
| The name and address to which future correspondence should be addressed: Reymond Dawson | | | Secretary of State 700 West Jefferson Basement West | |
| _ 350 | 05 Uinton Rd. E. 083617 | mmeH | PO Box 83720 Boise ID 83720-0080 208 334-2301 | |
| 5. Name ar copy is (i | nd address for this acknow fother than # 4 above): | viedgment | Phone number (optional): 208: 365: 6139 | |
| | | | 200 303 613 | |

IDAHO SECRETARY OF STATE

98/91/2005 95:00

CK: 178 CT: 158010 BH: 824361

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