

## **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. 09 AUG 10 AM 8: 38

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

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

D132751

| The assumed business name which the und        | largianad uso(s) in the transaction of   | İ          |
|--|--|------------|
| business is:                                   | lersighed use(s) in the transaction of   |            |
| BC Bluemel                                     | •  |            |
|  |  |            |
| 2. The true name(s) and business address(es)   |  |            |
| business under the assumed business name  Name |  |            |
|  | Complete Address   |            |
| Brandon Corey Bluemel                          | 315 S. Byron #9  |            |
|  | Shelley ID B3274   |            |
|  |  |            |
| 3. The general type of business transacted und | der the assumed business name is:  | , ,        |
| Retail Trade Transportation                    | and Public Utilities   |            |
| ☐ Wholesale Trade ☐ Construction               |  |            |
| Services Agriculture                           | Submit Certificate of  |            |
| ☐ Manufacturing ☐ Mining                       | Assumed Business   |            |
| Finance, Insurance, and Real Estate            | Name and \$25.00 fee to:   |            |
| 4. The name and address to which future        | Idaho Secretary of State   |            |
| correspondence should be addressed:            | 450 N 4th Street<br>PO Box 83720   |            |
| <b>n</b> 1 · · ·                               | Boise ID 83720-0080  |            |
| Brandon C. Bluemel                             | (208) 334-2301   | ;          |
| 315 8. Byron #9                                | (255) 65 1 255 .   |            |
| Shelley 11) 832 14                             |  |            |
| 5. Name and address for this acknowledgmer     | nt   |            |
| COPY is (if other than # 4 above):             |  |            |
|  |  |            |
|  | Secretary of State use only  | ,          |
|  | 18   |            |
| 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1          | pd utges   | •          |
| Signature (Signature required)                 | of the state of th | ż          |
| Printed Name: Brandon Blueme!                  | IDAHO SECRETARY OF STATE  OB/10/2009 05:  CX: 380 CT: 239514 BH: 118  1 8 25.89 = 25.89 GSBIN MA   | F          |
| Capacity/Title: Owner                          | 08/10/2009 05:<br>CK: 389 CT: 239514 BH: 118   | 00<br>M194 |
| (see instruction # 8 on back of form)          | 6 1 0 25.00 = 25.00 ASSUN NA   | WE #       |