## FILED EFFECTIVE



## **CERTIFICATE OF**

ASSUMED BUSINESS NAME OF STREET AND 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 ming.	
The assumed business name which the under business is:	signed use(s) in the transaction of
RIVERFRONT COARDENS	RU Park
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:     Name     Complete Address	
StAN MOORE HO	1 Box 15 Lucile, Topy 83542
	CI Box 15 Lucila, IDANO 83542
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation ar Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  PUERTREME LANGUES RUDON  HC 1 Box 155  LUCILE, IDAUG 835542	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	Phone number (optional):
COPY is (if other than # 4 above).	208.628-3777
	Secretary of State use only
Printed Name: STAN MCCRE  Capacity/Title: CONTER  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  100000000000000000000000000000000000

D 88889