

## **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.

2009 JAN 12 PM 12: 48

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE

D 127503

TAIED HOLLINGS  2. The true name(s) and business address(expusiness under the assumed business named business n	•	ntity or individual(s) doing
Name		Complete Address
IIM Rhodes	9430	o FARRYIEW AVE BOISE &
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future		Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street
correspondence should be addressed:  Tim Rhodes  9436 7 ARVIEW AP  Boise, ID 83704		PO Box 83720 Boise ID 83720-0080 (208) 334-2301
5. Name and address for this acknowledgm copy is (if other than # 4 above):	ent	
	<u></u>	
		Secretary of State use only
	pNormstebn formstebn.p65 Revised 04/2003	