

Signature:\_

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED EFFECTIVE

| CERT                        | IFICATE OF                        | FILED EFFECTIVE  |
|-----------------------------|-----------------------------------|--|
| ASSU                        | <b>MED BUSINES</b>                | S NAME   |
| Title 30, Ch                | apter 21, Part 8, Idaho Code      | Sec. 16  |
| Filing fee:                 | \$25.00.                          | S NAME  S NAME |
| 4                           |                                   | "EOF OF ST   |
|                             |                                   | rsigned use(s) in the transaction of business (see   |
| 2 BROTHERS TOWN             | NG                                | <del></del>  |
|                             |                                   |  |
| 2. The individual and/or e  | entity names and busine           | ess address(es) of those doing business under  |
|                             | s name (do <u>not</u> include the | · · · · · · · · · · · · · · · · · · ·  |
| ERIC DODSON                 | 1821 W GROU                       | SE ST,NAMPA ID 83651   |
| (Name)                      | (Address)                         | VE CALDWELL ID COOF  |
| ERNEST DODSON (Name)        | (Address)                         | VE CALDWELL ID 83605   |
| CINDY DODSON                | · _                               | VE CALDWILL ID 83605   |
| (Name)                      | (Address)                         |  |
| (Name)                      | (Address)                         |  |
| (Name)                      | (ungess)                          |  |
| 3. The managed have of he   | .=: 4=                            | atter and an all the sign and a second in  |
|                             |                                   | er the assumed business name is:   |
| Retail Trade                | Construction                      |  |
|                             | ☐ Agriculture<br>☐ Manufactu      |  |
| ⊠ Del Alces                 |                                   | mig Finance, insurance, and Real Estate  |
|                             |                                   |  |
| 4. Mailing address for fut  | ure correspondence:               | 5. Name and address for this acknowledgment  |
| ERIC DODSON                 |                                   | COPY IS (if other than # 4):   |
| (Name)                      |                                   | (Name)   |
| 1821 W GROUSE ST            |                                   |  |
| (Address) NAMPA             | IDAHO 83651                       | (Address)  |
| (City)                      | (State) (Zipcode)                 | (City) (State) (Zipcode)   |
|                             |                                   |  |
| Printed Name: ERIC DOD      | SON                               | Secretary of State use only  |
| (3)                         |                                   | IDAHO SECRETARY OF STATE   |
| Signature:                  |                                   | 11/16/2015 05:00   |
| Printed Name: ERNEST DODSON |                                   | CK:3368214 CT:172099 BH:1500586<br>10 25.00 = 25.00 ASSUM NAME #2  |
| Signature:                  | · //                              | AG 20.00 - 20.00 ADDUM MANE #2   |
|                             |                                   | D 182643   |
| Printed Name: CINDY DODSON  |                                   | 1 11/1/2040  |

Rev. 08/2015

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