

FILED EFFECTIVE

CERTIFICATE UP
ASSUMED BUSINESS NAME
Pursuant to Section 53-504, Idaho Code, the undersigned
submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

SECRETARY OF STATE
STATE OF IDAHO

NOTE: See instructions on reverse before filing.

1	
The assumed business name which the undersignation     business is:	aned use(s) in the transport
1 i	
Legacy Property Manager	me-t
2. The true years	75a7
The true name(s) and business address(es) of the business under the assumed business name:	ne entity or individual(s) doing
business under the assumed business name:  Name	( ) =====
	Complete Address
- COOL Z. Muhbaia.	2020 Primruse La Nama ID 83686
3. The general type of business transacted under the	
<ol><li>The general type of business transacted under th</li></ol>	e assumed business name is:
Retail Trade Transportation and F	Public Utilities
Services	0.1
☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	
correspondence should be addressed:	Secretary of State 700 West Jefferson
	Basement West
Joch L Hubbard	PO Box 83720
Legacy Property Management	Boise ID 83720-0080 208 334-2301
$\mathcal{L}(\mathcal{A})$	200 354-2301
5. Name and address for this acknowledgment	Phone number (optional):
copy is (if other than # 4 above):	
	_484-3125
	Secretary of State use only
50	
Signature: (signature required)	
Signature:    Signature	
Capacity/Title:	IDANO SECRETARY OF STATE
Sapacity/ little: Chore	08/11/2005 05:00 CK: 1031 CT: 191239 BH: 965590
(see instruction # 8 on back of form)	1 # 25.80 = 25.80 ASSUM NAME # 2

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