

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 FEB 20 AM 9: 36

SECRETARY OF STATE STATE OF IDAHO

## Please type or print legibly. Instructions are included on back of application.

The assumed business name w business is:	hich the undersigned use(s) in the transaction of
Chasing Chrome Gu	ide Service
V	
2. The true name(s) and <u>business</u> business under the assumed bu	address(es) of the entity or individual(s) doing usiness name:
<u>Name</u>	Complete Address
Thomas Pipkin	363 moon Gulch Rd
	Kelloga ID 83837
	74
3. The general type of business tra	ansacted under the assumed business name is:
_	ansportation and Public Utilities
	onstruction
	griculture
	ining Submit Certificate of
	Assumed Business
Finance, Insurance, and I	Real Estate Name and \$25.00 fee to:
4. The name and address to which	h future Secretary of State
correspondence should be add	
same,	PO Box 83720 Boise ID 83720-0080
	208 334-2301
5. Name and address for this ack	nowledgment
COPY IS (if other than # 4 above):	
	Secretary of State use only
gnature:	
inted Name: Thomas Pipki	<u>n</u>
apacity/Title:	
gnature:	TRAILA APPREPARU AT ATLAN
inted Name:	02/20/2014 05:00
apacity/Title:	CK: 3875 CT: 158810 BH: 1411371
apacity/ 1100	

abn amd Rev. 07/2010

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