

CERTIFICATE OF ASSUMED BUSINESS NAME

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

12 MAY -1 AM 9:00

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

SECRET BY OF STATE

	AND TO ME THE SECOND
The assumed business name which the under business is:	rsigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name Name Name	
3. The general type of business transacted under Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	er the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: William Rengel 98 Arrow Wood Ct. Twin Falls, TD, 83301	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):	
Signature:	Secretary of State use only
Signature: Printed Name: Capacity/Title:	IDAHO SECRETARY OF STATE 05/01/2012 05:00 CK: 979948 CT: 172099 BH: 1322246 1 0 25.00 = 25.00 ASSUM NAME # 2

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