

227

**FILED EFFECTIVE**



# CERTIFICATE OF 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.**

**NOTE: See instructions on reverse before filing.**

2008 MAR 11 AM 10:13  
SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

**Hodges & Associates, CPAs**

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

### Complete Address

**Brad Hodges, CPA**

320 2nd Ave N, Twin Falls, ID 83301

3. The general type of business transacted under the assumed business name is:

- ☐ Retail Trade      ☐ Transportation and Public Utilities  
☐ Wholesale Trade      ☐ Construction  
☒ Services      ☐ Agriculture  
☐ Manufacturing      ☐ Mining  
☐ Finance, Insurance, and Real Estate

4. The name and address to which future correspondence should be addressed:

**Brad Hodges, CPA**

**682 Cindy Drive**

**Twln Falls, ID 83301**

5. Name and address for this acknowledgment copy is (if other than # 4 above):

**Brad Hodges, CPA**

**320 2nd Ave N**

**Twin Falls, ID 83301**

**Signature:**

Printed Name:

**Capacity/Title:**

(see instruction # 8 on back of form)

**Secretary of State use only**

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IDAHO SECRETARY OF STATE  
03/11/2008 05:00  
CK: 1493350 CT: 172099 BH: 1103974  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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