

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 AUG 30 AM 9: 21

SECRETARY OF STATE STATE OF IDAHO

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

	Idaho Apartments
The true name(s) and <u>business</u> add business under the assumed busine <u>Name</u>	dress(es) of the entity or individual(s) doing ess name: <u>Complete Address</u>
Logan Robinson	5354 W Old Hwy 91, Inkom, ID 83245
Ryan Robinson	540 Fairway, Pocatello, ID 83201
Retail Trade Transp Wholesale Trade Const Services Agricu	Submit Certificate of
<ul><li>✓ Manufacturing</li><li>✓ Finance, Insurance, and Rea</li></ul>	Assumed Business
4. The name and address to which fur correspondence should be address  Logan Robinson	sed: 450 North 4th Street PO Box 83720 Boise ID 83720-0080
4530 S 5th Ave Pocatello, ID 83204	208 334-2301
5. Name and address for this acknow copy is (if other than # 4 above):	ledgment
	Secretary of State use only
nature:	
nted Name: Logan Robinson	
pacity/Title: owner nature: Ruan Idrinon	· ·
Hature: Nyan Larmon	IDAHO SECRETARY OF STATE
nted Name: Ryan Robinson	08/30/2010 05:00 CK: 520565 CT: 250781 BH: 12367

D41772