| <u>27</u>   |  |
|---|--|
| CERTIFICATE O<br>ASSUMED BUSINES  | S NAME   |
| Pursuant to Section 53-504, Idaho Code,<br>submits for filing a certificate of Assumed  | Business Name.   |
| Please type or print legibly.<br>Instructions are included on back of application.  |  |
| 1. The assumed business name which the undersigned use(s) in the transaction of business is:  |  |
| <ol> <li>The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing<br/>business under the assumed business name:</li> </ol>   |  |
| Name  | Complete Address   |
| - Tracy Wery  | 3715 Bitteroot Dr  |
| byron Wery  | <u>Coevr d'Alene, ID</u>   |
|   | 93815  |
| <ul> <li>3. The general type of business transacted and address for this acknowledgm copy is (if other than # 4 above):</li> <li>3. The general type of business transacted and address to which future and address to which future and address to which future addressed:</li> </ul> | on and Public Utilities<br>n Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| Signature:<br>Printed Name:<br>Capacity/Title:<br>Signature:<br>Printed Name:<br>Capacity/Title:<br>OWNER   | Secretary of State use only<br>IDAHO SECRETARY OF STATE<br>02/27/2015 05:00<br>CK:1011 CT:158010 BH:1463732<br>10 25.00 = 25.00 ASSUM NAME #<br>DI77109                            |