

(see instruction # 8 on back of form)

## **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. FILED EFFECTIVE

10 JUN 30 AM 8: 41

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the undersigned business is:  Out the Coad Gridd	ed use(s) in the transaction of
2. The true name(s) and business address(es) of the business under the assumed business name:  Name  Ernesto Nuncz 10868	Complete Address
3. The general type of business transacted under the and Retail Trade  Transportation and Pull Wholesale Trade  Construction  Agriculture  Agriculture  Manufacturing  Mining  Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:    Crnesto Wuncz	
Signature: <u>Cruestle Vinnes</u> Printed Name: <u>Evnesto Winez</u> Capacity/Title: <u>owney</u> (sog instruction # 9 on book of form)	Secretary of State use only  IDAHO SECRETARY OF STATE  O6/30/2010 05:00  CK: 5858663696 CT: 158010 BH: 1228784 1 8 25.00 = 25.00 ASSUM NAME #