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CERTIFICATE OF	FILED EFFECTIVE
ASSUMED BUSINESS	
Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bu	
<u>Please type or print legibly.</u>	SECRETARY OF STATE
Instructions are included on back of appli	Cation. STATE OF IDAHO
1. The assumed business name which the und	ersigned use(s) in the transaction of
business is: CROCKETT COMMAND	
L'KOCKEll LOMMANO	
2. The true name(s) and <u>business</u> address(es)	of the entity or individual(s) doing
business under the assumed business name	
Mame Maria	Complete Address
Carl Chelant	10259 W MAYMIE 83709
	BOSETP
3. The general type of business transacted under the assumed business name is:	
Retail Trade Iransportation Wholesale Trade Construction	and Public Utilities
Services Agriculture	
Manufacturing Mining	Submit Certificate of
Finance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
4. The name and address to which future	
correspondence should be addressed:	Secretary of State 450 North 4th Street
10259 W MAYMIE 83714	PO Box 83720
BOISE, ID	Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above): 	
	Secretary of State use only
Signature: 104 Folt	
Printed Name: Cody CROCKETT	IDAHO SECRETARY OF STATE 07/25/2016 05:00
Capacity/Title:	CK:4061438 CT:172099 BH:1538907 1@ 25.00 = 25.00 ASSUM NAME #2
Signature:	10 20.00 - 20.00 Addom Made #2
Printed Name:	Diagina
Capacity/Title:	D188129

abn.pmd Rev. 07/2010