

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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.



XI	eratedPC
The true name(s) and business address(business under the assumed business na	es) of the entity or individual(s) doing ame: Complete Address PO Box 521, Blanchard, ID 83804
W26525	
	ion and Public Utilities
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	Submit Certificate of Assumed Business Name and \$25.00 fee to
The name and address to which future correspondence should be addressed: Salom Technologies, LLC PO Box 521 Blanchard, PD 83804	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledge copy is (if other than # 4 above):	gment Phone number (optional): 208-437-0695
	Secretary of State use only
ignature: rinted Name: Capacity/Title: (see instruction # 8 on back of form)	