

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

09 OCT 26 AM II: 26

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

IDAHO BAIL	BONDS'		<del></del>
The true name(s) and business address(es) of business under the assumed business name:  Name  FATE TAGE  (C) 184913		tity or individual(s) doing  Complete Address 5 POST STREET BOISE 83704	
The general type of business transacted under	-	•	
☐ Retail Trade ☐ Transportation a ☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate  The name and address to which future correspondence should be addressed: ☐ IDAHO BAIL BONDS ☐ PO BOX 140674 ☐ BOISE ID 83714		Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301	
<ol> <li>Name and address for this acknowledgment copy is (if other than #4 above):</li> </ol>	t		
ted Name:	g/corp/formslabn formelatin_p65 Revised 04/2003	Secretary of State use only	
cacity/Title: PRESIDENT (see instruction # 8 on back of form)	g:tcorptin	IDAHO SECRETARY 10/26/2005 CK: CASH CT: 241675	9 95:

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