

## **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.

2005 N. D. 22 Fill 9: 24

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARIA OF STATE

BOREN SERVICES FOR YOU	
The true name(s) and business address(est business under the assumed business name Name  PATRICIA BOREN	· · · · · · · · · · · · · · · · · · ·
	nder the assumed business name is:
Wholesale Trade	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
<ul><li>EMMETT, IDAHO 83617</li><li>5. Name and address for this acknowledgme copy is (if other than # 4 above):</li></ul>	ent Phone number (optional):
	Secretary of State use only
ignature: PATRICIA BOREN  apacity/Title: OWNER  (see instruction # 8 on back of form)	g.complorms/abn p65  Bevised 04/2003  TDAHO SECRETARY OF STATE  93/22/206  95:

LK: 48117458246 CT: 158010 RH: 944788 1 0 25,00 = 25.00 ASSUM NAME # 2

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