

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFECTIVE 15:8 HA 31 NAL 80

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersigned use(s) in the transaction of business is:      Rocky Mountain Dispatch DEPOT	
2. The true name(s) and business address(es) of the er business under the assumed business name:  Name  Trady E STEAR IDS  HCP62	ntity or individual(s) doing  Complete Address
3. The general type of business transacted under the a    Retail Trade	
Signature: Standard (signature required)  Printed Name: Standard (signature required)  Capacity/Title: OWNER  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  21/16/2028 25:20  CK: 155-96 - 25:98 accilin Mone # 2

1 8 25.00 = 25.00 ASSUM NAME # 2

