

CERTIFICATE OF ASSUMED BUSINESS NAME

FILLD EFFECTIVE

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

11 SEP-8 AM 9: 02

Please type or print legibly. Instructions are included on back of application.

SEGRE BY OF STATE STATE OF IDAHO

	B-Geez	· · · · · · · · · · · · · · · · · · ·
The true name(s) and <u>business</u> business under the assumed I	ousiness name:	ntity or individual(s) doing <u>Complete Address</u> ster St. Pocatello, ID 83204
	ransacted under the a ransportation and Pub Construction	
Services	Agriculture Mining	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to whi correspondence should be ad 914 W Custer St. Pocatello, ID 8320	dressed:	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acl copy is (if other than # 4 above):	knowledgment	
		Secretary of State use only
gnature: Michael Gilson		
apacity/Title: Sole Proprietor		
gnature:		IDAHO SECRETARY OF STATE
inted Name:		09/08/2011 05:00 CK: 24745853 CT: 158010 BH: 128964 1 0 25.00 = 25.00 ASSUN NAME #
apacity/Title:		

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