

Capacity/Title:\_

## **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. 2014 OCT 30 AM 10: 45

## Please type or print legibly.

SECRETARY OF STATE STATE OF IDAHO Instructions are included on back of application.

The assumed business name which the undersige business is:	. ,
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name:  Name  NATTHEWS	
3. The general type of business transacted under the Retail Trade Transportation and I Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	·
4. The name and address to which future correspondence should be addressed:  STALL MATTHEWS  10074/STALL F3669	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	·
rinted Name: SEAN MATTHEWS Capacity/Title: ONNER	Secretary of State use only  IDAHO SECRETARY OF STATE  10/30/2014 05:00  CK:2325320 CT:172099 BH:1447  16 25.00 = 25.00 ASSUM NAME
Signature:	March -
Printed Name:	D174653

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