

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2014 MAY -7 AM 8: 56

FILED EFFECTIVE

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

Name Vince Jessen	Complete Address 1006 N 1100 E Shelley ID 83274
Retail Trade Transp	Cultivate Contificate of
Finance, Insurance, and Rea The name and address to which fur correspondence should be address	Assumed Business Name and \$25.00 fee to:  Secretary of State 450 North 4th Street
Wolverine Repair 1006 N 1100 E Shelley ID 83274	PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknow copy is (if other than # 4 above):	ledgment

US/U7/2014 US: UU CK:106244685151 CT:296558 BH:1423602 16 25.00 = 25.00 ASSUM NAME #2

17/003

Capacity/Title: Owner

Signature:

Printed Name: \_\_\_\_\_

Capacity/Title:\_\_\_\_\_