

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 SEP -3 AM 8: 46
SECTION BY OF STATE
STATE OF IDAHO

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

	The Bal	ancing Act	
	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:  Name  Complete Address  Lica Hallenbeck  Pa Roy 14 Silverton ID 82867		
	Lisa Hallenbeck	Po Box 14	S, Silverton ID 83867
3.	The general type of business transacted un		
	Retail Trade Transportation Wholesale Trade Construction Services Agriculture	n and Pub	olic Utilities
	✓ Services		Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4.	The name and address to which future correspondence should be addressed: Lisa Hallenbeck		Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
	Po Box 14 Silverton, ID 83867	:	
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	nt	
iana	The month Manhack	<u> </u>	Secretary of State use only
_	ture: Twat No Whole Co.		
	city/Title: Owner		
•	ture:		IDANO SECRETARY OF STATE
_	ed Name:		09/03/2010 05:00 CK: 1641 CT: 158818 BH: 123748
	city/Title:		1 8 25.00 = 25.80 ASSUM NAME 1

abr.pmd Rev. 07/2010

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