

Printed Name: Frank

(see instruction # 8 on back of form)

Capacity/Title:\_\_/

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 APR -7 PM 2: 39

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filling.

The true name(s) and business address(es) of the business under the assumed business name:  Name	e entity or individual(s) doing  Complete Address
FRANK DEMPSEY YO	BOX 344 (MARDEN VALLE
The general type of business transacted under the	e assumed business name is:
Retail Trade Transportation and F  Wholesale Trade Construction	
☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
The name and address to which future correspondence should be addressed:	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
	(208) 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only

IDAHO SECRETARY OF STATE

94/97/2010 05:00

CX: CASH CT: 158010 BH: 1216680
1 0 25:00 = 25:80 ASSUM NAME # 2

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