D133713



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 09 SEP 22 AM 8: 16

Please type or print legibly.

SECRETARY OF STATE

NOTE: See instructions on reverse before	ore filing. STATE OF IDAHO
The assumed business name which the ur business is:	
Mountain Home Pro R.	eal Estate
The true name(s) and business address(es business under the assumed business name to business name to business address).	me:
Name	Complete Address
Barbara Fogleman	PU BOX 1213
	MOUNTain Home, Id 83647
3. The general type of business transacted u	nder the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Barb Fogleman	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
	Secretary of State use only
Signature: (alignature required)	IDAHO SECRETARY OF STATE 99/22/2009 05:00 CK: 1479 CT: 248758 BH: 1187972 1 8 25.68 = 25.66 ASSUM MANE #
Printed Name: Barbara Fogleman	IDAHO SECRETARY OF STATE 69/22/2009 05:00
Capacity/Title: OWNEY	CK: 1479 CT: 248750 BH: 1187972 1 8 25.08 = 25.08 ASSIM NOME 2
(see instruction # 8 on back of form)	O