

Signature:

Printed Name:

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.

OBOCT 31 AM 8: 15
SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

**Travis Byington** 

Owner

(see instruction # 8 on back of form)

1. The assumed business name which the undersigned use(s) in the transaction of husiness is: PinD Industries 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: **Complete Address** Name 326 Beulahs In. Idaho Falis Id 83401 **Travis Byington** 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade **Agriculture** Submit Certificate of Services Assumed Business Mining Manufacturing Name and \$25.00 fee to: Finance, Insurance, and Real Estate Idaho Secretary of State 4. The name and address to which future 450 N 4th Street correspondence should be addressed: PO Box 83720 Boise ID 83720-0080 Travis Byington (208) 334-2301 326 Beulahs In. Idaho Falls Id 83401 5. Name and address for this acknowledgment CODY IS (if other than # 4 above): Secretary of State use only

IDAHO SECRETARY OF STATE

10/31/2008 05:00

CK: 2262 CT: 158010 BH: 1142465

1 0 25.00 = 25.00 ASSUM NAME # 2

D125950