



CERTIFICATE OF ASSUMED BUSINESS NAME **FILED**
(Please type or print legibly. See instructions on reverse.)

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9-22-23 PM 2:31

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

ID440-Hi-Tech Organic Refrigerant

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
TROY BEAL owner	522 Addison Ave. W. T.F. 10, 53301
MARIO ROJAS sv owner	522 Addison Ave. W. T.F. 10 53301

3. The general type of business transacted under the assumed business name is _____
(mark only those that apply)

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input checked="" type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): 734-8297

HI-TECH ORGANIC REFRIGERANT
522 ADDISON AVE. W.
TWIN FALLS, ID. 83301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

**Submit Certificate of
Assumed Business
Name and \$20.00 fee to:**

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

Signature: [Signature]

Printed Name: Troy A Beal

Capacity: Owner

(see instruction # 8 on back of form)

IDAND SECRETARY OF STATE

04/28/1999 09:00
CK: 3142 CT: 95990 NH: 211589

1 @ 20.00 = 20.00 ASSUM NAME # 2

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