

(see instruction # 8 on back of form)

## **CERTIFICATE OF** FILED EFFECTIVE **ASSUMED BUSINESS NAME**

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

06 MAY 17 PH 3: 04

## Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETA IN OF STATE STATE OF IDAHO

	OIVER CONTRACTOR
The assumed business name which the und business is:	· · · · · · · · · · · · · · · · · · ·
OUTWEST MOBILE	HOMES
The true name(s) and <u>business</u> address(es business under the assumed business name     Name	
Reberca Williams	880 EAST 2700 SOUTH
	HAGERMAN IDAHO 83332
The general type of business transacted un	der the assumed business name is:
	and Public Utilities
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:
4. The name and address to which future correspondence should be addressed:  **Reserva B. WILLIAMS**  **880 EAST \$700 SDUTH*  **HAGERMAN, ID 83332	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol><li>Name and address for this acknowledgme copy is (if other than #4 above):</li></ol>	nt Phone number (optional):
	Secretary of State use only
Signature: Shulan	Weighting 8 and 1966
Printed Name: Roberca B. WILLIAMS	IDAHO SECRETARY OF STATE   105/17/2006 05 = 00   000
Capacity/Title: ON 1 Ce / dealer	i og