(see instruction # 8 on back of form)

FILED EFFECTIVE



## **CERTIFICATE OF** ASSUMED BUSINESS NAME

CERTIFICATE	OF ?
ASSUMED BUSIN	· · · · · · · · · · · · · · · · · · ·
Pursuant to Section 53-504, Idaho (	Code, the undersigned
submits for filing a certificate of Assu	umed Business Name.
Please type or print legi	bly.
NOTE: See instructions on reverse	e before filing.
1. The province disk	
<ol> <li>The assumed business name which the undersigned use(s) in the transaction of business is:</li> </ol>	
Bannatt Concrata	
LUNIATI CONORATA	
2. The true name(s) and <u>business</u> addre	es(as) of the entity or individually as
business under the assumed business	s name:
, <u>Name</u>	Complete Address
Scott Bannatt	1/337 Thursday 4
Mannay Bannatt	- HUSS SHIBONIA TRYGAN
Ca Carmeri igu jijiran	
<ol><li>The general type of business transacte</li></ol>	ed under the assumed business name is:
Retail Trade Transportation and Public Utilities	
☐ Wholesale Trade ☐ Construc ☐ Services ☐ Agricultu	
- Ground	Submit Certificate of
	Assumed Business Name and \$25.00 fee to:
Finance, Insurance, and Real Es	nate
<ol><li>The name and address to which future</li></ol>	
correspondence should be addressed:	
Bannatt Congreta	Basement West PO Box 83720
1/332 Stusses 610	Boise ID 83720-0080
Haydan . W 83839	208 334-2301
5	2
5. Name and address for this acknowled	gment Phone number (optional):
COPY is (if other than # 4 above):	
	Secretary of State use only
sind the	9d Vgg
Signature: (signature required)	IDAHO SECRETARY OF STATE
Printed Name: Julinon Bennatt	Spd Ungas
Capacity/Title: Book Kan Ken	1 0 25.00 = 25.00 ASSUM NAME # 2
	<del></del> قرا

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