

208-334-2300 TAX ID

227



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE
2005 JAN 31 PM 2:46
CLERK OF DISTRICT COURT
STATE OF IDAHO

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

MADECA

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

Name _____

Complete Address

MARY WILLIAMS

Box 7035 Ketchum, ID 83340

DEIDE RODRIGUEZ

BOX ~~2847~~⁵²³ Ketchum, ID 83340

CAROL REES

Box 2817 Ketchum, ID 83340

3. The general type of business transacted under the assumed business name is:

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

4. The name and address to which future correspondence should be addressed:

MARY WILLIAMS

Box 7035

Ketchum, ID 83340

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

Phone number (optional):

208 726 2925

**Submit Certificate of
Assumed Business
Name and \$25.00 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: _____

Mary Williams

Printed Name:

MARY WILLIAMS

Capacity/Title:

OWNER

(see instruction # 8 on back of form)

Completion forms 655
11/13/03

IDAHO SECRETARY OF STATE
02/01/2005 05:00
CK: 8176 CT: 150010 BH: 790440
1 @ 25.00 = 25.00 ASSUM NAME # 2

D83947