

Printed Name:

Capacity/Title:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

09 MAY 11 PM 12: 43

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

Please type or print legibly.

SECRETARY OF STATE STATE OF IDAHO

NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: rathleen Writes 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 hathleen 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Services Agriculture Submit Certificate of Manufacturing Minina Assumed Business 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 (208) 334-2301 5. Name and address for this acknowledgment CODY IS (if other than #4 above): Secretary of State use only Signature:

Revised 04/2003

IDANO SECRETARY OF STATE

95/11/2009 95:06

CK: 59%65880 CT: 188852 BH: 1178913

1 2 25.66 = 25.60 ASSUM NAME # 2

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