

Printed Name:

Signature:

Capacity/Title:

Capacity/Title:

Printed Name:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2014 MAR - 3 AM 11: 52 SECRETARY OF STATE

STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of business is: Soile appliance 2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address 7217 N. Particuest Lie Dosc 7083714 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining **Assumed Business** Finance, Insurance, and Real Estate Name and **\$25.00** fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 450 North 4th Street PO Box 83720 Boise ID 83720-0080 Particies 208 334-2301 5. Name and address for this acknowledgment CODY IS (if other than # 4 above): Secretary of State use only Signature:___

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IDAHO SECRETARY OF STATE
103/03/2014 05:00
CK: CAH CT: 158010 BH: 1413116
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