STUTE BY OF STATE

STATE OF IMPLO



## CERTIFICATE OF ASSUMED BUSINESS NAME 2014 AUG 22 AM 8: 38

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

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

1.	The assumed business name which the undersigne business is:  SILLS TAXI ~ \$	ed use(s) in the transaction of
2.	The true name(s) and <u>business</u> address(es) of the obusiness under the assumed business name:  Name  MEYERS 292.4	Complete Address  WACKFOOT, TD/ 83221
3.	The general type of business transacted under the Retail Trade Transportation and Pu Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4.	The name and address to which future correspondence should be addressed:  STUTAM MEYERS  292, NI#R, 400, W   BACKFOOT, ID   8322	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State use only

1DAHO SECRETARY OF STATE 08/22/2014 05:00

CK:1589985 CT:158010 BH:1438387 1@ 25.00 = 25.00 ASSUM NAME #2

0173304

Signature:

Printed Name:

Signature: \_\_\_\_

Printed Name: \_

Capacity/Title:\_\_

Capacity/Title: RACKFOOT