



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED/EFFECTIVE

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

00 DEC 20 AM 8:56

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

Spirit Hollow

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

Connie Anderson 425W, 200N, Blackfoot, ID
~~CA Margaret Hocking-Wharton Mackay ID 83221~~

3. The general type of business transacted under the assumed business name is.
 (mark only those that apply)

☐ Retail Trade	☐ Manufacturing	☐ Transportation and Public Utilities
☒ Wholesale Trade	☐ Agriculture	☐ Finance, Insurance, and Real Estate
☐ Services	☐ Construction	☐ Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional) 208-782-2070

Connie Anderson
425W, 200N
Blackfoot, ID 83221

5. Name and address for this acknowledgment copy is (if other than #1 above):

Submit Certificate of
Assumed Business
Name and \$20.00 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

Connie Anderson

Printed Name

Connie Anderson

Capacity:

Owner

(See instruction # on back of form)

IDAHO SECRETARY OF STATE

01/02/2001 09:00
CK: 168 CT: 140243 BH: 370096

1 @ 20.00 = 20.00 ASSUM NAME # 2

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