

Capacity/Title:\_

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 NOV 22 AM 9: 47

STATE OF IDAHO

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

	The assumed business name which the und business is:	dersigned use(s) in the transaction	ı of	
	Johnny on the Spot, at your door mobility service.			
	The true name(s) and <u>business</u> address(es) business under the assumed business nam Name  John B. Price		Complete Address	
3.	The general type of business transacted un  Retail Trade Transportation  Wholesale Trade Construction  Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	submit Certificate of Assumed Business		
	The name and address to which future correspondence should be addressed:  John B. Price  8173 Roy Ln. Boise, Idaho. 83714	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301		
	Name and address for this acknowledgmen copy is (if other than # 4 above):	nt		
Signat	cure 113	Secretary of State use	only	
_	d Name: John B. Price			
Capacity/Title: Owner		IDAHO SECRETARY OF STATE		
Signature:		CK: 836848 CT: 172099	11/22/2011 US:UU CK: 836848 CT: 172099 BH: 1298983 1 P 25.00 = 25.08 ASSUM NAME # 3	
Printed Name:				

D151512