

Capacity/Title: Owner

(see instruction # 8 on back of form)

## **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.

05 MAY 11 PM 12: 59

## Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

87667

1. The assumed business name which the unde	ersigned use(s) in the transaction of
business is:	
Hady's Mountus	in Land
/	
2. The true name(s) and <u>business</u> address(es) of the present the assumed business name	- · · · · · · · · · · · · · · · · · · ·
business under the assumed business name  Name	Complete Address
Mike C. Adda	91 Flowing Springs 128 83716
Frank AND	11 1- 1000-100 2/11/1006 (co 35/16
Frances L. Adde	91 Flores Carrow Dis
- Tunces C. May	91 Flowing Springs Ro Bore Id. 83716
3. The general type of business transacted under	
Detail Trade Transportation a	and Public Utilities
Retail Trade Iransportation a Wholesale Trade X Construction	2 Q2 Q3Q0
Services Agriculture	Colomia Constitution of
☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and <b>\$25.00</b> fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
	Basement West
91 Flowing Springs Rd Borse, Idaho 83716	PO Box 83720 Boise ID 83720-0080
150134, Idaho 85716	208 334-2301
5. Name and address for this acknowledgmen	nt Phone number (optional):
COPY is (if other than # 4 above):	208-344-3352
	Secretary of State use only
	530
Signatura Martin C MAles	IDAHO SECRETARY OF STATE   IDAHO SECRETARY OF
Signature: (signature required)	IDAHO SECRETARY OF STATE
Printed Name: Mike a Addy	IDAHO SECRETARY OF STATE    Daho Secretary of State   Daho Secretary of State
Consoitu/Titlo:	1 8 25.00 = 25.00 ASSUM NAME # 2