

## **CERTIFICATE OF** CERTIFICATE OF FILED EFFECTIVE ASSUMED BUSINESS NAME 09 MAY 22 AM 8: 55 Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name SECRETARY OF STATE STATE OF IDAHO

NOTE: See instructions on reverse before filing.

B. PEDERSON SIGN	<u> </u>
2. The true name(s) and business address(es) of the business under the assumed business name:  Name  PEDERSON  10	the entity or individual(s) doing  Complete Address  219 RUTH AUE  SANDPOINT, ID 83864
The general type of business transacted under the second control of the second cont	the assumed business name is:
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  BETH PEDERSON 1019 RUTH AUE  SANDPOINT ID 83864  5. Name and address for this acknowledgment	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301  Phone number (optional):
CODY IS (if other than # 4 above):	<del></del>
	Secretary of State use only
nted Name: RETH PEDERSON	50000000000000000000000000000000000000

OWNER

(see instruction # 8 on back of form)

Capacity/Title:

D130936