



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on back of form.)

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

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

A. M. Communications

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

Name

Complete Address

Alex Marchello

540 W. Hwy. 26 C 9

Blackfoot, 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) 280-2130

Alex Marchello

540 W. Hwy 26 C 9

Blackfoot, ID 83221

5. Name and address for this acknowledgment copy is (if other than # 4 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: Alex Marchello

Printed Name: Alex Marchello

Capacity: Sole proprietor

(see instruction # 8 on back of form)

Revision 1/98
g:\corp\form\stabin p65

IDAHO SECRETARY OF STATE
12/14/2001 05:00
CK: 895778859 CT: 123941 BH: 434720
1 @ 20.00 = 20.00 ASSUM NAME # 2

D50467