## EILED EFFECTIVE



## CERTIFICATE OF ASSUMED BUSINESS NAME

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

| | MAR 2 | AM 8: 31

SECHE BRY OF STATE STATE OF IDAHO

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

	WALLACE	/INTAGE GA	MES	
business under	s) and <u>business</u> address(e the assumed business na <u>Name</u>		ntity or individual(s) doing <u>ெண்ணெள்e Address</u>	
FOREST G. VAN DORN		PO BOX 444, OSBURN, ID 83849		
Retail Tra Wholesal Services Manufact	ide	on and Pub n	ssumed business name is:  lic Utilities  Submit Certificate of Assumed Business	
4. The name and correspondenc FOREST VAN DO PO BOX 444		e	Name and \$25.00 fee to:  Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
5. Name and add copy is (if other tha	ess for this acknowledgm	ent		
gnature:	Van II		Secretary of State use only	
inted Name: FORES	T VAN DORN			
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rinted Name:		-	CX: 4 CY: 256824 BH: 12654 1 0 25.00 = 25.00 ASSIM NAM	
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