

Capacity/Title: OWNER.

(see instruction #8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

**FILED EFFECTIVE** 

D84604

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

JUFES 15 Ph 2: 31

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARIO STATE STATE OF IDAHO

1. The assumed business name which the unbusiness is:	
The true name(s) and <u>business</u> address(estable) business under the assumed business name     Name	s) of the entity or individual(s) doing
3. The general type of business transacted under the second secon	on and Public Utilities
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  Tim fulsey  2425 Gan Club Rd.  Ingle Ideh 83860	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledged copy is (if other than #4 above):</li> </ol>	Dhana number (autianal):
Signature: (signature required)  Printed Mame: Tim Time I feel scy	Secretary of State use only  \$\frac{1}{2}\text{GOT} \text{OF STATE} \\ \text{SU02/90 Bussing} \text{OF STATE} \\ \text{CK: 4255 CT: 156916 BH: 793321} \\ 1 \text{ 25.96 = 25.86 ASSUM NAME \$\frac{1}{2}\text{25.96} \end{array}