

## **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.

2015 APR -6 AM 9: 46

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

SECRETARY OF STATE

			STATE OF IDAHO"
1.	The assumed business name which the un business is:	dersigned	d use(s) in the transaction of
	INLAND EMPIRE DISTRIBUTORS		
2.	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:  Name  Complete Address		
	ROSALIE D. POTRATZ	140 Canfi	eld Ave., Dalton Gardens, Idaho 83815
3.	The general type of business transacted under the assumed business name is:		
	Retail Trade Transportation and Wholesale Trade Construction Services Agriculture		olic Utilities
	☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate		Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4.	The name and address to which future correspondence should be addressed:  Rosalie D. Potratz	İ	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
	6719 Rude Street		
	Dalton Gardens, Idaho 83815		
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	nt	
			Secretary of State use only
Signa	ature: p (Komi). Onto		IDAHO SECRETARY OF STATE
rinte	ed Name: Rosalie D. Potratz		04/06/2015 05:00 CK:33631 CT:308605 BH:1469664
Capa	icity/Title: Owner		16 25.00 = 25.00 ASSUM NAME #
Signa	ature:		
	ed Name:		D178079
Capa	icity/Title:		$\cup$ 110 $\cup$ 1

abn.pmd Rev. 07/2010