FILED EFFECTIVE



## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Please type or print legibly.

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

10 APR 22 AM 8: 22

SECRETARY OF STATE STATE OF IDAHO

StagesTop	
The true name(s) and business address(es) of the business under the assumed business name:  Name  Rick Frei Main St Makstrato  Deb Frei Main St Macktrato  Main St Mack Inn 10 Box 25	Complete Address  BOY 249 Macks Inn 83  BOX 249 Macks Inn 824
The general type of business transacted under the	
Retail Trade Transportation and Positive Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed:  Rick Frei Deborah Frei  Po 249 Macks Inn Id  23433	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
i. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
·	

Printed Name: <u>Deborah A Frei</u>

Capacity/Title: Owner - Operator (see instruction # 8 on back of form)