

Capacity/Title: Secretam

(see instruction # 8 on back of form)

## **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.

100 17 FAI2: 26

Please type or print legibly. NOTE: See instructions on reverse before filing.

CARL HE STATE

Powell Distributing	
2. The true name(s) and business address(state business under the assumed business name  Name  Powell Consulting Corp.  C 148370	• • • • • • • • • • • • • • • • • • • •
3. The general type of business transacted	under the assumed business name is:
Retail Trade Transportati Wholesale Trade Constructio Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Powell Distributing 1142 Cow Horse Dr  Kung ID 83634	Submit Certificate of Assumed Business Name and \$25.00 foo to:
<ol><li>Name and address for this acknowledge copy is (if other than # 4 above).</li></ol>	ment Phone number (optional): (208)3しょーシャ13
	Secretary of State use only

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