

Capacity/Title:

(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. 07 DEC 10 AM 9: 10

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

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the undersigne business is:	d use(s) in the transaction of
2. The true name(s) and business address(es) of the elements business under the assumed business name:  Name  Takke B Galles 76 W.	entity or individual(s) doing  Complete Address  100 N Rupe(+ TO 83350
3. The general type of business transacted under the	
<ul> <li>Wholesale Trade</li> <li>Services</li> <li>Manufacturing</li> <li>Finance, Insurance, and Real Estate</li> </ul>	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  76 W 100 N	Idaho Secretary of State 450 N 4th-Street PO Box 83720 Boise ID 83720-0080
Rupert, JD \$3350  5. Name and address for this acknowledgment	(208) 334-2301
CODY IS (if other than # 4 above):	Secretary of State use only
gnature: (signature required) rinted Name: TAKE Gy/es	