

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

2012 SEP 28 AM 9: 16

**FILED EFFECTIVE** 

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

SECRETARY OF STATE STATE OF IDAHO

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

1. The assumed business name which the under business is:  Sawtooth Comp	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name  Name  Nathan Allan Emericle  2. Nathan Allan Emericle  2. Nathan Allan Emericle  2. Nathan Allan Emericle  3. Nathan Allan Emericle  4. Nathan Allan Emericle  5. Nathan Allan Emericle  6. Nathan Emericle  7. Nathan Emericle  8. Nathan Emericle  8	of the entity or individual(s) doing  Complete Address  BES Monroe Cir. Twin Falls, 10.8330/
3. The general type of business transacted und  Retail Trade Transportation a  Wholesale Trade Construction  Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	er the assumed business name is: and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  Nathan Emerick  325 Monroe Circle  Twin Falls, 10.8330/	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
Signature: <u>Nathan Emerick</u> Printed Name: <u>Nathan Emerick</u> Capacity/Title: <u>Owner</u>	Secretary of State use only
Signature: Printed Name:	IDAHO SECRETARY OF STATE  99/28/2012 05:00  CK: 5842 CT: 158818 BH: 1341749  1 0 25.80 = 25.80 ASSUM NAME N 2

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Printed Name: \_ Capacity/Title: