## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

## FILED EFFECTIVE

2009 MAR 19 AM 10: 43

SECRETARY OF STATE STATE OF IDAHO

Silver C	Creek Cabins
The true name(s) and business address(extension business under the assumed business name     Name     Patrick "Corky" Federico     Terri Federico	• • • • • • • • • • • • • • • • • • • •
3. The general type of business transacted u  Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:  Corky & Terri Federico 960 Wildwood Way  Twin Falls, Idaho 83301	Submit Certificate of Assumed Business Name and \$25.00 fee to:
5. Name and address for this acknowledgm copy is (if other than # 4 above):  Corky & Terri Federico  960 Wildwood Way  Twin Falls, Idaho 83301  gnature: (algnature régulated)  inted Name: Patrick "Corky" Federico	Secretary of State use only    Secretary of State use only

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