

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 AUG 21 AM 8: \$

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

Name Christopher D Capps The general type of busine	PO E	Complete Address Box 137 Bliss, ID 83314
	POI	30x 137 Bliss, ID 83314
The general type of busine		
Retail Trade Wholesale Trade Services	Transportation and Construction	the assumed business name is: Public Utilities
☐ Manufacturing ☐ Finance, Insurance,	Mining	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to correspondence should be Christopher Capps		Secretary of State 450 North 4th Street PO Box 83720
PO Box 137		Boise ID 83720-0080 208 334-2301
Bliss, ID 83314		200 334-2301
Name and address for this copy is (if other than # 4 above):	acknowledgment	

IDAHO SECRETARY OF STATE 08/21/2014 05:00

CK:17059850720 CT:158010 BH:1438216 16 25.00 = 25.00 ASSUM NAME #2

173290

Capacity/Title: Owner

Signature: ____

Printed Name:

Capacity/Title:_