

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.



The assumed business name which the undersigned use(s) in the transaction of business is: VARCIN ENTERPRISES	
	of the entity or individual(s) doing e: Complete Address POBOX 35 YELLWPINE, ID 83677 570 STIBNITE ROAD
	der the assumed business name is:
 Wholesale Trade ☐ Construction Services ☐ Agriculture Manufacturing ☐ Mining Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: DARWIN C. DE BOIS DO BOY 35	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
POBOX 35 YELLOW PINE, ID 83677	208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above). 	Phone number (optional): 208-633-2255
	Secretary of State use only
Signature: De Bours (signature required)	1DAHO SECRETARY OF STATE 66/25/2007 05:00 CK: 2415 CT: 154918 RH: 1961977
Printed Name: <u>DARWIN C. DE BCLS</u>	Thomas and the state of the sta
Capacity/Title: <u>OWNER</u> (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 96/25/2007 05:00 CK: 2415 CT: 158010 BH: 1061977 1 0 25.00 = 25.00 ASSUM NAME #