

Capacity/Title:

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.

SECREDBY OF STATE STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

The assumed business name which the under business is: Sure Remains	ersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Name	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `
☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining	er the assumed business name is: and Public Utilities Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: 2200 Occulos Bullet 11, 833/8	Name and \$25.00 fee to: 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: Cox Dayne	Secretary of State use only
Printed Name: Con D How Con Capacity/Title: Owner Signature: Lon D Joanna Capacity Name:	IDANO SECRETARY OF STATE 12/09/2010 05:00
Printed Name:	CK: 90713367 CT: 158810 BH: 1258177 1 0 25.00 = 25.00 ASSUM MAME # 2

abn.pmd Rev. 07/2010

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