

CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 JAN 10 AM 9: 02

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

SECRET RY OF STATE STATE OF IDAHO

The true name(s) and <u>business</u> address business under the assumed business	s name:
Name	Complete Address
John T. Mitchell	
	Coeur d'Alene Idaho 838
Wholesale Trade ☐ Construct ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Es 4. The name and address to which future correspondence should be addressed: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	ation and Public Utilities tion re Submit Certificate of Assumed Business 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 acknowledg copy is (if other than # 4 above):	ment -
Do T 0: +1 11	Secretary of State use only
signature: You T. Mutchell	_
rinted Name: John T. M. tchell	-
capacity/Title: owner	_
Signature:	10AHO SECRETARY OF STATE 61/16/2611 65:60
Printed Name: John T. M. tch	CK: 555861 CT: 158810 BH: 1254585 1 8 25.88 = 25.88 ASSUM NAME #
Capacity/Title: مجرين من المالية المالي	

abn.pmd Rev 07/2010

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