

## 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.



1. The assumed business name which the u	ındaroiasa	10440
business is:	muersigne	d use(s) in the transaction of
- Riverside Hom	0.5	
•	<u> </u>	
<ol><li>The true name(s) and business address(e business under the assumed business na</li></ol>	es) of the $\epsilon$	entity or individual(s) doing
Name		Complete Address
Dave Hansen Inc.	4059	N 3300 E Twin Falls To
( ( ) 63 326 )		833
	<del></del>	
3. The general type of business transacted u	inder the a	assumed business name is:
and the second s		
☐ Retail Trade ☐ Transportation ☐ Wholesale Trade ☐ Construction		DIIC Utilities
Services Agriculture	: 7	Out with Our signature
☐ Manufacturing ☐ Mining	• .	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	•	Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:		Secretary of State
		700 West Jefferson Basement West
		PO Box 83720
		Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgment copy is (if other than #4 above):</li> </ol>	ent	Phone number (optional):
		208-733-5619
		Secretary of State use only
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ignature:	metadon.	en de la companya de La companya de la co
Printed Name: Dave Hansen	g LoopVormstatin formstatin p86 Revised 04/2003	
Capacity/Title: Oresident	PVforms	IDAHO SECRETARY OF STATE
(see instruction # 8 on back of form)	<b>8</b>	CK: 5366 CT: 193889 BH: 965596 1 @ 25.08 = 25.08 ASSUM MAME #

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