

## 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.

2013 JUL 29 AM 9: 30

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

- SECRETARY OF STATE

Wake Robin	
2. The true name(s) and <u>business</u> address( business under the assumed business na	
<u>Name</u>	Complete Address
Gail J. Spaulding	P. O. Box 474
	1163 D Street
	Plummer, Idaho 83851
Wholesale Trade Constructio	ion and Public Utilities on
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed:  Gail Spaulding Wake Robin  P. O. Box 474  Plummer, ID 83851	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
i. Name and address for this acknowledgm copy is (if other than # 4 above):	nent
h .n. 1 n	Secretary of State use only
nature: Hall Sparlding	<b></b>
ted Name: Gallo. Spaulding	<b>-</b>
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pacity/Title:	CK: 1421 CT: 285763 BH: 13837 1 0 25.00 = 25.00 ASSUM NAME

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