



# 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.

02 JUN 24 PM 3:00

SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.

NOTE: See Instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

DAVID JOHNSON

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Property Management of Boise LLC  
P. O. Box 44381  
IDAHO 83711  
W19740

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input checked="" type="checkbox"/> Finance, Insurance, and Real Estate	

4. The name and address to which future correspondence should be addressed:

DAVIN JOHNSON P. O. Box 44381  
Boise IDAHO 83711

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional): \_\_\_\_\_

Signature: 

Printed Name: TRAVIS CLARKE

Capacity/Title: MANAGER

(see instruction # 8 on back of form)

Form 505  
Revised 01/2001

Secretary of State use only

IDaho SECRETARY OF STATE  
06/24/2002 05:00  
CK: CASH CT: 161427 BH: 473652  
1 E 20.00 = 20.00 ASSUM NAME # 5

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