

Printed Name: \_ Capacity/Title:\_\_

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 10 SEP -3 AM 8: 09

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

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the unbusiness is:  Colored Server Serv	
2. The true name(s) and <u>business</u> address(est business under the assumed business name    Saac Bean	
3. The general type of business transacted under the Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estates	n and Public Utilities  Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:  250 N. Latah # 102	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent
eignature:	Secretary of State use only
Printed Name:	IDAHO SECRETARY OF STATE  @9/@3/2010 @5:00  CK: 587834 CT: 172899 BH: 123754 1 0 25.00 = 25.00 ASSUM NAME N

abn.pmd Rev. 07/2010

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