

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.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

GUILLERMO CORONA

OWNER

(see instruction # 8 on back of form)

OTOCT-9 AN 8:54
STATE OF TOAHO

. The true name(s) and business address(es) of the entity or individual(s) doing	
business under the assumed business name:	Complete Address
GUILLERMO CORONA	122 E 450 N
	SHOSHONE ID 83352
Retail Trade Transportation and F Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: GUILLERMO CORONA	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
P O BOX 3115	(208) 334-2301
HAILEY ID 83333	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State use only

IDAHO SECRETARY OF STATE
10/09/2007 05:00
CK: 9181897 CT: 158018 BH: 1879323
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