

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

2014 SEP 24 AM #: 55

SECRETARY OF STATE STATE OF IDAH O

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

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

<ol> <li>The assumed business name which the undersigned use(s) in the transaction of business is:</li></ol>	
business under the assumed business name:  Name  KEUIN PETERSON 15	Complete Address  20 Highland Drive  Blackfoot, Id. 83221
3. The general type of business transacted under the Retail Trade Transportation and I Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed:  P.O. Box 1387  Black foot, Edako  73221	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
inted Name: KEUIN PETERSON apacity/Title: OWNER	Secretary of State use only IDAHO SECRETARY OF STATE 09/24/2014 05:00 CK:1176 CT:301466 BH:14426 16 25:00 = 25:00 ASSUM NAME

1) 173912

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