

Printed Name: Marilyn Bruce

(see instruction #8 on back of form)

Capacity: Manager

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.

TUYUMUM	= 5
The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Marily of Bruce P	he entity or individual(s) doing Complete Address Box 867 allis, la 83226
The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction	
☐ Services☐ Agriculture☐ Mining☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$20.00 fee to:
The name and address to which future correspondence should be addressed: TUTUMUM P.O. Box 807 Challis, Id 83226	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):

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IDAHO SECRETARY OF STATE

04/09/2002 05=00

CK: 153 CT: 158810 BH: 457732

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