

CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED/EFFECTIVE 11 AUS 17 in 3:38

STATE OF TOAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

2. The true name(s) and <u>business</u> address(e business under the assumed business nar	es) of the er		
Name		Complete Address	
BILLY W GAGE 101 BEE		ERS/Humbred Rd SAGIE Id 83860	
		ers/Humbred Rd SAGIE Id 83860	
The general type of business transacted in the second	under the a	assumed business name is:	
Retail Trade		olic Utilities	
Services Agriculture		Submit Certificate of	
☐ Manufacturing ☐ Mining		Assumed Business	
Finance, Insurance, and Real Estat	e	Name and \$20.00 fee to:	
4. The name and address to which future		Secretary of State	
correspondence should be addressed:		700 West Jefferson Basement West	
BU GABE		PO Box 83720	
101 BEERS/Humbied Rd.		Boise ID 83720-0080 208 334-2301	
SAGIE Id 83860		200 334-230 [
Name and address for this acknowledgm copy is (if other than # 4 above):	nent	Phone number (optional):	
		1-208-265-8709	
		Secretary of State use only	
	n.p65		
nature: Bill South	g-korp/forms\abn.p65		
nted Name: Bill Ga ap.	formslabn formsl Revised 01/2001		
pacity: Owner	Pyform	INHO SECRETARY OF STATE 98/17/2001 05 # 6	
(see instruction # 8 on back of form)	. Boylet	CK: 1245 CT: 150177 BH: 414 1 0 20.00 = 20.00 ASSIM NON	

D 47604