



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2012 SEP -5 AM 9:08

Please type or print legibly.

Instructions are included on back of application.

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Thorncreek Vending

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Craig Fredericksen

1531 14th Avenue West, P.O. Box 301

Gooding, Idaho 83330

3. The general type of business transacted under the assumed business name is:

- ☒ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☐ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

Thorncreek Vending, C/O Craig Fredericksen

P.O. Box 301, Gooding, Idaho 83330

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Craig Fredericksen

P.O. Box 301

Gooding, Idaho 83330

Signature: Craig Fredericksen

Printed Name: Craig Fredericksen

Capacity/Title: Owner

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
09/05/2012 05:00
CK: NO CHECK # CT: 145713 DN: 1330612
1 @ 25.00 = 25.00 ASSUM NAME # 2

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