

Printed Name: Dan Moldenhauer

(see instruction # 8 on back of form)

Capacity/Title:\_

## CEF., IFICATE 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.



2.	The true name(s) and <u>business</u> address(es) of business under the assumed business name:  Name	the entity or individual(s) doing
	Moldenhauer, Inc.	Complete Address
	C 60756	89 West 2nd South Soua Springs, ID 83276
1. Th co	The general type of business transacted under the general type of business transacted under the general type of business transacted under the general type of business transportation and wholesale Trade Construction Agriculture Agriculture Manufacturing Mining Finance, Insurance, and Real Estate the name and address to which future trespondence should be addressed:  Moldenhauer, Inc.  Dan or Debra Moldenhauer  89 West 2nd South	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Na co	Soda Springs, ID 83276 ame and address for this acknowledgment py is (if other than # 4 above):	Phone number (optional):

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IDAHO SECRETARY OF STATE **92/04/2003 05:00**CK: 2 CT: 158010 BH: 660777
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