

Capacity/Title: \_\_\_\_\_\_

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

2005 377 23 67 68 69

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Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersign business is:  ———————————————————————————————————	
Ellis Sound Insurance	Agency
2. The true name(s) and business address(es) of the business under the assumed business name:  Name  Pacific Empire Radio Corporation	ne entity or individual(s) doing  Complete Address
C141368	
3. The general type of business transacted under th	e assumed business name is:
Retail Trade Transportation and F Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  7. Jolee Duclor P. o. Box 578  Lewisyon 70 8750/	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):  288-799-9083
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