

Capacity/Title: Member

## **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.

Please type or print legibly. Instructions are included on back of application.



	Crawford Olson F The true name(s) and <u>business</u> address(esbusiness under the assumed business nar	s) of the e		
	<u>Name</u>	Complete Address		
	The Crawford Company LLC	PO 2036, McCall, ID. 83638		
	$(\omega 38220)$			
3.	The general type of business transacted under the assumed business name is:			
	Retail Trade Transportation and Public Utilities			
	☐ Wholesale Trade ☐ Construction		•	
	Services Agriculture	1		7
	☐ Manufacturing ☐ Mining		Submit Certificate of	- 1
	Finance, Insurance, and Real Estate	;	Assumed Business Name and <b>\$25.00</b> fee to:	İ
4.	The name and address to which future		Secretary of State	
	correspondence should be addressed:		450 North 4th Street	İ
-	PO 2036, McCall, ID. 83638		PO Box 83720	
			Boise ID 83720-0080 208 334-2301	
			200 004-2001	
5.	Name and address for this acknowledgme	nt		
	COPY is (if other than # 4 above):			
	Basil		Secretary of State use or	aly
gnat				
	d Name: Robert D. Crawford  city/Title: Member			** *** *** *** *** *** *** *** *** ***

CK: 1835 CT: 215476 BH: 1385884 1 8 25.88 = 25.88 ASSUM NAME # 2

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