## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

	gives notice of adoption of an As	•	
1.	The assumed business name which the unbusiness is:	J	e(s) in the transaction of
	4.N. Custom APPLIC	ation	
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	Antonio / Martinez		mplete Address er Plesanant 5
3.	The general type of business transacted ur (mark only those that apply)	nder the assu	med business name is:
	Retail Trade	Fin	ansportation and Public Utilities nance, Insurance, and Real Estate ning
4.	The name and address to which future correspondence should be addressed:  Antonio Martine C  Submit Certificate of		
	20/06 Lower Plesanant \$		Assumed Business Name and \$20.00 fee to:
	Caldwell ID 83605		Secretary of State
5.	Name and address for this acknowledgment copy is (if other than # 4 above):		700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		<b>&amp;</b>	Secretary of State use only
Cianat	ure: Antonio A Mortine Z	Revision 1/98	IDAHO SECRETARY OF STATE  11/24/1999 09:00  X: CASH CT: 123368 DH: 268885
	1/1 2-1/		1 9 29.90 = 20.00 ASSUM NAME # 2
Printed Name: Mnfouro / MartineZ  Capacity: Owner / operator		piformstabn p65	731031
	(see instruction # 8 on back of form)	- pifc	0000

g:\corp\forms\abn.p

Capacity: outer operator (see instruction # 8 on back of form)