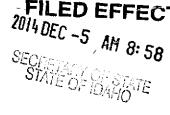


## **CERTIFICATE OF** ASSUMED BUSINESS NAME

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

## FILED EFFECTIVE



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

The true name(s) and <u>business</u> address; business under the assumed business n	
<u>Name</u>	Complete Address
Jason Dickinson	131 Pleasants View Rd
	Blanchard, ID 83804
Retail Trade Transportat  Wholesale Trade Construction  Services Agriculture  Manufacturing Mining	Submit Certificate of
Finance, Insurance, and Real Esta	Assumed Business  Ate Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgn copy is (if other than # 4 above):	nent
	Secretary of State use only
inature:	_
gnature: Jason Dickinson	Secretary of State use only  IDAHO SECRETARY OF STATE  12/05/2014 05:00

D175335

Capacity/Title:\_\_

Printed Name: