227



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2016 OCT -3 AM 10: 57

SECRETATE OF STATE

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

	Instructions are included on back of appl	icatìon.			
1.	The assumed business name which the uno business is: RUSTICS	dersigned	d use(s) in the transaction of		
2.	The true name(s) and <u>business</u> address(es) business under the assumed business nam				
	<u>Name</u>	10.5	Complete Address		
	David Anderson	B67 RIMVIEW Ln E		[
		Twin Falls, 10 83301			
				. 	
3.	The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction				
	☐ Services☐ Agriculture☐ Mining☐ Finance, Insurance, and Real Estate		Submit Certificate of Assumed Business Name and \$25.00 fee to:		
4.	The name and address to which future correspondence should be addressed: BLO Rimvicw Ln E Twin Falls (ID 83301		Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301		
ج	Name and address for this acknowledgmen	. 1 1 †			
J,	CODY IS (if other than #4 above).				
		-	•		
			Secretary of State use only		
Signa	ature: Del Aller		, 1		
Printed Name: <u>David Anderson</u> Capacity/Title: <u>Owner</u>			IDAHO SECRETARY OF STATE 10/03/2016 05:00 CK:CASH CT:329735 BH:1549194		
Signa	ature:		10 25.00 = 25.00 ASS		
Printe	ed Name:				
Capa	acity/Title:		D189520		
		فييفك			

abn.pmd Rev. 07/2010