Printed Name:

Capacity/Title:_

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

	00
CERTIFICATE OF ASSUMED BUSINESS NAM Pursuant to Section 53-504, Idaho Code, the undersig submits for filing a certificate of Assumed Business Nate of Please type or print legibly. NOTE: See instructions on reverse before filing.	yned 🖖 🌭 🏒 🔭 🤼 📗
1. The assumed business name which the undersigned business is: Butcher Jor	•
2. The true name(s) and business address(es) of the elements business under the assumed business name: Name Bruce Burtcher	complete Address 153 W 6 50 St. Whole St.
3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Construction	
 Wholesale Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed:	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):
Bark 07 Idaho PD BOX 126 SI Anthony ID	Secretary of State use only
Signature Du M. Button	D118017