

Capacity/Title:_

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

09 SEP 30 PM 1: 20

SECRETARY OF STATE STATE OF IDAHO

NOTE: See instructions on reverse before filing	J.	
The assumed business name which the undersign business is: XOVESS	ed use(s) in the transaction of	
2. The true name(s) and business address(es) of the business under the assumed business name: Name 7161	Complete Address CURTANA RA BO LECTURA RA VOISE TO:	 33209 188 IO 8370
Retail Trade Transportation and Property Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301	
5. Name and address for this acknowledgment copy is (if other than # 4 above): 2.6.1 Out 12.1 2.6.1 Set 10 83709 Signature: Ames Rughts State S	Secretary of State use only IDAHO SECRETARY	OF STATE

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