

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



To the SECRETARY OF STATE, STATE OF IDAHO **FILED/EFFECTIVE**
 Pursuant to Section 53-504, Idaho Code, the undersigned **FILED** FEB 4 AM 10:58
 gives notice of adoption of an Assumed Business Name.

1. The assumed business name which the undersigned uses in the transaction of business is:

BUDGET MOTEL OF MONTPELIER

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name

Complete Address

TIM R. NEWBERRY

240 NORTH 4TH MONTPELIER, ID 83254

3. The general type of business transacted under the assumed business name is:
 (mark only those that apply)

☐

Retail Trade

☐

Manufacturing

☐

Transportation and Public Utilities

☐

Wholesale Trade

☐

Agriculture

☐

Finance, Insurance, and Real Estate

☒

Services

☐

Construction

☐

Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): _____

230 NORTH 4TH

MONTPELIER, ID 83254

5. Name and address for this acknowledgment copy is (if other than # 4 above):

IRELAND BANK

PO BOX 218

MONTPELIER, ID 83254

Signature: _____

Printed Name: TIM R NEWBERRY

Capacity: _____

(see instruction # 8 on back of form)

Submit Certificate of
 Assumed Business
 Name and \$20.00 fee to:

Secretary of State
 700 West Jefferson
 Basement West
 PO Box 83720
 Boise ID 83720-0080
 208 334-2301

Secretary of State use only
 IDAHO SECRETARY OF STATE

02/04/2000 09:00
 CK: 5751 CT: 126256 BH: 207433

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 32849

Revision 2/97

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