Capacity: (

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name AND 10: 1-7

	The assumed business name which the unbusiness is:	OTATE UP TOAHO	_
2.	The true name(s) and business address(e business under the assumed business name Name	· · · · · · · · · · · · · · · · · · ·	
	KODNEY W FERGUSON ?	3354 POIRIER ROBLANCHAROLD	<u>></u> ኧ:
3.	The general type of business transacted un(mark only those that apply)	inder the assumed business name is:	_
	 ☐ Retail Trade ☐ Manufacturir ☐ Wholesale Trade ☐ Agriculture ☐ Construction 	Finance, Insurance, and Real E	
4.	The name and address to which future I	Phone number (optional): 208-437-443	1
	S354 POIRIER RD		1
	Correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson	1
	Correspondence should be addressed: KAMONA M CROZIER 3354 POURIER RD BURCHARD, ID 83804 Name and address for this acknowledgme	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	1

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