227

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

07 NOV 23 AM 8:59

SECRETARY OF STATE
STATE OF IDAHO

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

   HIRE McGUIRE

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

Name	Complete Address
Robert C. McGUIRE P.O. BOX 157 ELK CITY, ID 83525	DRIVER'S LICENSE ADDRESS 11.2 MILE SOUTH ON CROOKED RIVER ROAD FROM IDAHO STATE ROUTE 14 OROGRANDE, IDAHO 83525

3. The general type of business transacted under the assumed business name is:

- ☐ Retail Trade
- ☐ Wholesale Trade
- ☒ Services
- ☐ Manufacturing
- ☐ Finance, Insurance, and Real Estate
- ☐ Transportation and Public Utilities
- ☐ Construction
- ☐ Agriculture
- ☐ Mining

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

4. The name and address to which future correspondence should be addressed:

   Robert C. McGUIRE
   P.O. BOX 157
   ELK CITY, ID 83525-0157

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

Signature: Robert C. McGuire
(signature required)

Printed Name: Robert C. McGUIRE

Capacity/Title: Owner
(see instruction # 8 on back of form)

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Revised 04/2003

Secretary of State use only

IDAHO SECRETARY OF STATE
11/23/2007 05:00
CK: 4118 CT: 158018 BH: 1086695
1 @ 25.00 = 25.00 ASSUM NAME # 2

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