

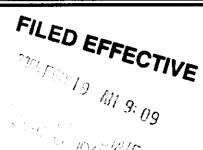
Capacity/Title: といんとに

(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. NOTE: See instructions on reverse before filing.



Anderson Taxidermy	
The true name(s) and <u>business</u> address(es) of the business under the assumed business name:	entity of individual(s) doing
Name	Complete Address
	BOX SUB MCKINZIE CREEK Rd
· · · · · · · · · · · · · · · · · · ·	Unite BIRd, Id 83554
3. The general type of business transacted under the	a accumed husiness name is:
5. The general type of business transacted under the	, assumed business name is.
Retail Trade Transportation and P	'ublic Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
	Basement West
M. Joe Anderson	PO Box 83720 Boise ID 83720-0080
HCCI BUX 80 B	208 334-2301
white Bird, Id 83554	
5. Name and address for this acknowledgment	Phone number (optional):
COPY IS (if other than # 4 above):	839-2749
	Secretary of State use only
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gnature: // / / / / / / / / / / / / / / / / /	IDAHO_SECRETARY OF STATE

02/19/2004 05:00 CK: 1634 CT: 158018 BH: 728264 1 @ 25.00 = 25.00 ASSUM NAME # 2

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