

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

## Please type or print legibly. Instructions are included on back of application.

The assumed business name which the un	dersigned use(s) in the transaction of
business is:	
Lugo R Launche	, 5
<ol> <li>The true name(s) and <u>business</u> address(es business under the assumed business nan</li> </ol>	
<u>Name</u>	Complete Address
Taylor Lugo	4183 Rocky Ridge R.d.
	Idaho Falls VI.D. 83406
3. The general type of business transacted ur	nder the assumed business name is:
-	n and Public Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	
☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	
4. The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street
4183 Rocky Ridge K.d.	PO Box 83720 Boise ID 83720-0080
Idaho Falls I.D. 83406	208 334-2301
5. Name and address for this acknowledgme	nt
COPy is (if other than # 4 above):	
	Secretary of State use only
Signature:	
Printed Name: Taylor Thomas Lugo	
Capacity/Title: Owner	IDAHO SECRETARY OF STATE
Signature:	12/20/2012 05:00 CK: 113 CT: 277438 BH: 1352314 1 0 25.00 = 25.00 ASSUM NAME # 2
Printed Name:	<b>K</b>
Capacity/Title:	1)159895