



# 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.

2003 OCT -9 AM 8:30

Please type or print legibly.

**NOTE: See instructions on reverse before filing.**

SECRETARY OF STATE  
STATE OF IDAHO

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

RODY ENTERPRISES

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

MARIO F. NICOLosi

3217 S. McDermott Rd. Nampa, Id.

Rose Nicolosi

3217 S. McDermott Rd. Nampa, Id.

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

- |  |  |
|--|--|
| <input type="checkbox"/> Retail Trade                        | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade          | <input type="checkbox"/> Construction                        |
| <input type="checkbox"/> Services                            | <input type="checkbox"/> Agriculture                         |
| <input checked="" type="checkbox"/> Manufacturing            | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> Finance, Insurance, and Real Estate |  |

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

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

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

RODY ENTERPRISES

3217 S. McDermott Rd.

Nampa, Id. 83687

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

Phone number (optional):

208 465 0409

Farmers & Merchants State Bank

112 2nd Street South

Nampa, Id 83651

Signature: Mario F. Nicolosi

(signature required)

Printed Name: MARIO F. NICOLosi

Capacity/Title: OWNER

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE  
10/09/2003 05:00  
CK: 2892 CT: 150010 BH: 705799  
1 @ 25.00 = 25.00 ASSUM NAME # 2

g:\corp\forms\labn.p65  
Revised 04/2003

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