

Printed Name:

Capacity/Title: Partner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFE TIVE 10 JAN 11 PM 12: 40

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

SECRETARY OF STATE STATE OF IDAHO

NOTE: See instructions on reverse before filing.

The assumed business name which the unbusiness is: Anderson and Sons	dersigned use(s) in the transaction of
2. The true name(s) and business address(es business under the assumed business name Name Anderson and Sons Toseph and Gayle Anderson Tay C and Lisa J. Anderson	of the entity or individual(s) doing ne: Complete Address 1291 Sather Rd. Genesce. ID 83832 1291 Sather Rd. Genesce In 83832 1051 Berger Rd. Genesce. ID 83832
3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities	
Wholesale Trade Construction Services X Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: And erson and Sons	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
1291 Sather Rd. Genesee, ID 83832	(208) 334-2301
Name and address for this acknowledgme copy is (if other than # 4 above):	ent
Signature: Joseph P. Auch	Secretary of State use only

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