

## 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.

2013 NOV 26 AM 8: 32

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

SECRETATION STATE
STATE OF ENHO

Idaho Mediation Center	
business under the assumed	address(es) of the entity or individual(s) doing usiness name:
<u>Name</u>	Complete Address
Arkoosh Law Offices PLLC	802 W. Bannock St. 9th Floor
W 1183	PO Box 2900
- Mari	Boise, ID 83701
☐ Wholesale Trade ☐ G ■ Services ☐ G	ansportation and Public Utilities onstruction griculture Submit Certificate of
☐ Manufacturing ☐ I☐ I☐ Finance, Insurance, and	ining Submit Certificate of Assumed Business Real Estate Name and \$25.00 fee to:
4. The name and address to whi correspondence should be ad Idaho Mediation Center	ressed: 450 North 4th Street PO Box 83720
PO Box 2900	Boise ID 83720-0080 208 334-2301
Boise, ID 83701	
5. Name and address for this acl copy is (if other than #4 above):	nowledgment 
	Secretary of State use only
Signature:	
Printed Name: C. Tom Arkoosh	
Capacity/Title: Member	
Signature:	IDAHO SECRETARY OF STATE
Printed Name:	11/26/2012 05.00
Capacity/Title:	1 0 25.00 = 25.00 ASSUM NAME # 2

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