

Printed Name:

Capacity/Title:

(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.

FILED EFFECTIVE

07 NOV 13 PM 1:07

SECRETARY OF STATE STATE OF IDAHO

Carla Graham P.	Complete Address	
Value Value III	Complete Address	
	1 10x 615 10x 10 7 03539	
	23012 10 83537	
3. The general type of business transacted under t	ho con and have	
James and the or business transacted under the	ne assumed business name is:	
Retail Trade Transportation and	Public Utilities	
Wholesale Trade Construction		
Services Agriculture	Submit Certificate of	
☐ Manufacturing ☐ Mining	Assumed Business	
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:	
The name and address to which future	Idaho Secretary of State	
correspondence should be addressed:	450 N 4th Street	
	PO Box 83720	
Carla Graham	Boise ID 83720-0080	
Cada Graham	Boise ID 83720-0080	
Carla Graham PORCE LOS 2008 10 83339		
Carla Graham P.D. Box 675 Kookia Id 83539	Boise ID 83720-0080	
And Graham POR 1025 Lookia Id 83539 S. Name and address for this acknowledgment	Boise ID 83720-0080	
Carla Graham P.D. Box 675 Kookia Id 83539	Boise ID 83720-0080	
Looka Td 83539 5. Name and address for this acknowledgment	Boise ID 83720-0080	
Ada Graham Loskia Id 83539 5. Name and address for this acknowledgment	Boise ID 83720-0080	

IDAHO SECRETARY OF STATE
1/13/2007 05:00
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