

Capacity/Title:

## 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.

2014 JUN 24 PM 1: 04

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

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the und business is:	dersigned use(s) in the transaction of
The true name(s) and <u>business</u> address(es) business under the assumed business nam	) of the entity or individual(s) doing
<u>Name</u>	Complete Address
Shedmours LLC (W80877)	16582 Makogany Dr Naupa Idako 83687
3. The general type of business transacted unit   Retail Trade	der the assumed business name is: and Public Utilities
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
The name and address to which future correspondence should be addressed:      Sauce	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	t
	Secretary of State use only
Printed Name: <u>Serry C William</u> Capacity/Title: <u>Swale</u>	IDAHO SECRETARY OF STATE  06/24/2014 05:00  CK:2001050 CT:172099 BH:143055 16 25.00 = 25.00 ASSUM NAME #:
Signature:	DITZIYA
Printed Name:	