

## 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.

10 MAR 29 AM 9: 57

Please type or print legibly.
NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF DAHO

The true name(s) and business address(e business under the assumed business name     Name     Permy Mothershead	es) of the entity or individual(s) doing time:  Complete Address  350 First Street E. P.O. Box 207 Hancon, Idaho
Linda Moore	356 First Street E. P.O. Box 24 Hansen, Idaho g
3. The general type of business transacted u    Retail Trade	on and Public Utilities  Submit Certificate of Assumed Business
P.O. Box 207	(208) 334-2301
Hansen, Idaho 83334	
5. Name and address for this acknowledgme copy is (if other than #4 above):	ent
	Secretary of State use only
nature	1DAHO SECRETARY OF STATE  93/30/2019 05:06  CX: 525 CT: 246523 BH: 121536

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