

CERTIFICATE OF ASSUMED BUSINESS NAME

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

ts for filing a certificate of Assumed Business Nam Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

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SECRETARY OF STATE

The assumed business name which the under business is:	
2. The true name(s) and business address(es) of business under the assumed business name: Name Brenda K Weber	Complete Address 397 Twin Rivers Rd Athol, Id. 83801
3. The general type of business transacted under Retail Trade Transportation at Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Brenda Weber 397 Twin Rivers Rd	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	Secretary of State use only
Signature: <u>Brenda K Ulebur</u> Printed Name: <u>Brenda Weber</u> Capacity/Title:	IDAHO SECRETARY OF STATE 100

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