	CERTIFICATE OF ASSUM (Please type or print legibly. S	MED BUS See instruction	SINES NAME	
	To the SECRETARY OF STATE, STATE Pursuant to Section 53-504, Ida gives notice of adoption of an As	TE OF IDAHO ho Code, the ssumed Busir	undersigned 9.	
1.	The assumed business name which the unbusiness is:	dersigned us	e(s) in the transaction of	•
	LATTIN MOBILE BUTCH	IERING		
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:			
	<u>Name</u>	Con	nplete Address	
F	RODNEY LATTIN	316 EAST A	VE B, JEROME, ID 83338	
	The general type of business transacted un (mark only those that apply) Retail Trade Manufacturing Myholesale Trade Agriculture Services Construction The name and address to which future Progression of the correspondence should be addressed:	g 🗌 Tra 🔲 Fina 🔲 Min	nsportation and Public Utilities ance, Insurance, and Real Estate	;
	RODNEY LATTIN 316 EAST AVE B JEROME, ID 83338		Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State	
5.	Name and address for this acknowledgmer copy is (if other than #4 above): DL EVANS BANK ATTN: Kathy 980 SOUTH LINCOLN JEROME, ID 83338	nt :	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
	JEROHE, 1D 05550	S	Secretary of State use only 10AH0 SECRETARY OF STATE	
Signatu	rextocker Fatten	EK CK	84/26/2666 69:06 : 982122 CT: 130012 BH: 310710 1 0 20.06 = 20.08 ASSUM NAME # 2	
Printed	Name: RODNEY LATTIN	1_	D35151	
Capaci	ity: OWNER	mskabn.p855		

(see instruction # 8 on back of form)