

Capacity/Title: OWNER
Signature: Vandolman

Printed Name: \_\_ 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.

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

12 JAN -5 AN 9: 19

Instructions are included on back of application.	SECRETION
<b>)</b>	SECRETARY OF STATE
1. The assumed business name which the undersigned	ਰ use(s) in the transaction ਆ DAHO
business is:	
CYCLE PARTS AND TRADING	POST
2. The true name(s) and <u>business</u> address(es) of the	entity or individual(s) doing
business under the assumed business name:	Olata Addasas
<u>Name</u>	Complete Address
	80× 1658
MOF	200 7D. 83544
	8-476-5675
3. The general type of business transacted under the	
Retail Trade Transportation and Pu	blic Utilities
	•
Services Agriculture	
☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street PO Box 83720
DAN MCCONNELL	Boise ID 83720-0080
P.O. BOX 1658	208 334-2301
OROFINO, 20. 83544	
5. Name and address for this acknowledgment	ţ
CODY IS (if other than # 4 above).	į.
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	Secretary of State use only
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signature: Can McComll	ì
rinted Name: DAN MCCANNELL	<u> </u>

abn.pmd Rev. 07/2010

IDAHO SECRETARY OF STATE
01/05/2012 05:00
CK: 1 CT: 265683 BH: 1384535
1 0 25.80 = 25.88 ASSUM NAME # 2

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