CERTIFICATE OF ASSUMED BUSINESS NAME

Amy B. Cushman

Owner

(see instruction # 8 on back of form)

Printed Name:

Capacity/Title:

CERTIFICATE OF	NAME a undersigned asiness Name.
ASSUMED BUSINESS	NAME
Pursuant to Section 53-504, Idaho Code, the	e undersigned
submits for filing a certificate of Assumed Bu	isiness Name.
Please type or print legibly. NOTE: See instructions on reverse before	
MOIE. 388 HISQUOID OFFICE DOSOF	104/0 ^A /0
The assumed business name which the undo business is:	ersigned use(s) in the transaction of
ABC Dayca	are of Ucon
ADO DIŞO	
2. The true name(s) and business address(es)	of the entity or individual(s) doing
business under the assumed business name	
Name	Complete Address
Amy B. Cushman	4316 East 107 North, Idaho Falls, ID 83401
-	
3. The general type of business transacted und	der the assumed business name is:
Transportation	and Dublic Heilisian
	and Public Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business Name and \$25.00 fee to:
☐ Finance, Insurance, and Real Estate	14aille and 325.00 lee to.
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
Amy B. Cychmon	Basement West
Amy B. Cushman	PO Box 83720
4316 East 107 North	Boise ID 83720-0080 208 334-2301
Idaho Falls, ID 83401	200 004 2001
5. Name and address for this acknowledgmen	nt Phone number (optional):
COPY is (if other than # 4 above).	- 811
• •	
Gregory J. Ehardt	
1000 Riverwalk Drive, Suite 175	Secretary of State use only
Idaho Falls, ID 83402	· §
ignature: amy Cushman	occio
ignature: William Control	

IDAHO SECRETARY OF STATE
10/17/2003 05:00
CK: 1023 CT: 173677 BH: 706971
1 0 25.00 = 25.00 ASSUM NAME # 2

FILED EFFECTIVE