

## 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.

03 OCT 21 AM 8: 15

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

	-, 1110
The assumed business name which the under business is:	
business is:  Uilcox Broti	Itrs
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing     business under the assumed business name:	
business under the assumed business name:	Complete Address
Name	Complete Address
ochiff L. Wilcox, IF	2304 sunny brook Dr.
Michael W. Wilcox	AP1 # 103, Manipa Ed. 83686-6337
	same Address
3. The general type of business transacted unde	er the assumed business name is:
3. The general type of business transacted unde	
☐ Wholesale Trade ☐ Construction	nd Public Utilities
Services Agriculture	Submit Certificate of
	Assumed Business
	Name and \$25.00 fee to:
Finance, Insurance, and Real Estate	
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
	Basement West
Same As # 2	PO Box 83720
	Boise ID 83720-0080
	208 334-2301
5. Name and address for this acknowledgment	t Phone number (optional):
COPY is (if other than # 4 above):	208-703-2421
OOPY TO (II OUTO) III all # 7 above/.	ALD 10) ~ [0]
	Secretary of State use only
00000	39d c
Signature: ('VIIII LON -TT	S S
Signature: (signature required)	IDAHO SECRETARY OF STATE 10/21/2003 05:00
Printed Name: Oliff Wiles	IDAHO SECRETARY OF STATE  10/21/2003 05:00  CK: NO CK # CT: 158810 BH: 787548  1 2 25.88 = 25.88 ASSUM NAME # 2
Capacity/Title: YOU + NOK	<b>8</b>

(see instruction # 8 on back of form)

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