

Capacity/Title:

(see instruction # 8 on back of form)

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

Please type or print legibly. NOTE: See instructions on reverse before filing.

A CHUR 08 JUN 20 AM 9: 21 SECRETARY OF STATE

•••	
The true name(s) and business address(es) of business under the assumed business name: Name	the entity or Individual(s) doing  Complete Address
Teeter Hales Enterprise Solutions LLC	533 N. carswell Way Star Idaho 83669
(4275413)	
The general type of business transacted under	r the assumed husiness name is
The general type of business transacted under	i the assumed business name is:
Retail Trade Transportation an	nd Public Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future	idaho Secretary of State
correspondence should be addressed:	450 N 4th Street
	PO Box 83720 Boise ID 83720-0080
533 N. carswell Way Star idaho 83669	COISC ID 00720-0000
	(208) 334-2301
Name and address for this acknowledgment	
COPY is (if other than # 4 above):	
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	Secretary of State use only
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IDAHO SECRETARY OF STATE

06/20/2008 05=00

CK: 1288 CT: 227214 BH: 1120826

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