



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.
Instructions are included on back of application.

FILED EFFECTIVE

2013 OCT 10 AM 9:09

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

G & L Recovery

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

Gene Graham

1789 Osterloh Ave. Twin Falls Id. 83301

Lisa Graham

1789 Osterloh Ave. Twin Falls Id. 83301

3. The general type of business transacted under the assumed business name is:

- ☐ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☒ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

Gene Graham

1789 Osterloh Ave.

Twin Falls Id. 83301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

SAME AS ABOVE

Signature: _____

Printed Name: Gene Graham

Capacity/Title: Co/Owner

Signature: _____

Printed Name: Lisa Graham

Capacity/Title: Co/Owner

Secretary of State use only

IDAHO SECRETARY OF STATE
10/10/2013 05:00
CK: 10995 CT: 150010 BH: 1393460
1 @ 25.00 = 25.00 ASSUM NAME # 2

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