

Signature:

Printed Name:

Capacity/Title!

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2014 JAN -8 PM 2: 24

SECRETARY OF STATE STATE OF IDAHO

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

business under the assumed business na	es) of the entity or individual(s) doing me:
Name //	Complete Address
Casey Havenan	30/3 Westwier La
	Nampa 10 83686
The general type of business transacted u	under the assumed business name is:
	on and Public Utilities
☐ Wholesale Trade ☐ Construction	1
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	Secretary of State
correspondence should be addressed:	450 North 4th Street
Same	PO Box 83720 Boise ID 83720-0080
	208 334-2301
Name and address for this acknowledgme copy is (if other than # 4 above):	ent
Topy to the than #4 above).	

D167994

IDAHO SECRETARY OF STATE

1/08/2014 05=00

CK: 267 CT: 158010 BH: 1485022

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