

CERTIFICATE OF **ASSUMED BUSINESS NAME**

FILED/EF

Pursuant to Section 53-504, Idaho Code, the undersigned / no.

OF THE PERSON NAMED IN	submits for filing a certificate of Assumed Bu	siness Nar	me. UEC 21 AM 9:27
	Please type or print legibly.		STATOM 1 9: 27
<u>!</u>	NOTE: See instructions on reverse befor	<u>e filing.</u>	STATE OF DAHO
	assumed business name which the und ness is: Be Her way	lersigned	l use(s) in the transaction of
	true name(s) and <u>business</u> address(es) ness under the assumed business name:		
-	Name	~`**	Complete Address
<u>. 10</u>	son Hicks	527	aurova Dr NAMPA ED 83686
3. The	general type of business transacted und	der the as	ssumed business name is:
corr <u>Jo</u> <u>5</u>	Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate name and address to which future espondence should be addressed: Un Hicks 27 aurora Dr Ampa IN 83686		Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	me and address for this acknowledgmer	nt	Phone number (optional):
col	y is (if other than # 4 above):		208 461 2578
			Secretary of State use only
		<u></u>	
ignature: rinted Na apacity:	me: Jason Hicks Owner (see instruction #8 on back of form)	g.'corptomstabn formstabn.p65 Revised 01/2001	IDAHO SECRETARY OF STATE 12/21/2001 05:00 CK: 1128 CT: 154898 BH: 436866 1 0 28.88 = 28.86 ASSUM NAME 1 2
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