

## **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.

2014 AUG -4 AM 9: 19

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

Instructions are included on back	
The assumed business name which to business is:	the undersigned use(s) in the transaction of
Computer Rescue Service	
The true name(s) and <u>business</u> address under the assumed business <u>Name</u> Sharon Kielty	ess(es) of the entity or individual(s) doing ss name: <u>Complete Address</u> PO Box 403, Troy, ID 83871
Manufacturing Mining Finance, Insurance, and Real E	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed.  Web Rescue Service  PO Box 403	1 Secretary or State
Troy, ID 83871	208 334-2301
5. Name and address for this acknowled copy is (if other than # 4 above):	dgment
	Secretary of State use only
Signature: Sharon & Kultz Printed Name: Sharon Kielty	IDAHO SECRETARY OF STATE  08/05/2014 05:00  CK:1219 CT:182226 BH:1436032
Capacity/Title: Owner	16 25.00 = 25.00 ASSUM NAME #
Signature:	

M2467

Capacity/Title:\_\_

Printed Name: \_\_\_\_\_