

Capacity/Title:

(see instruction # 8 on back of form)

## 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.

03 APR 21 PM 2: 06

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

<ol> <li>The assumed business name which the undersigned use(s) in the transaction business is:</li> <li>Bell Bowd Company</li> <li>The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing</li> </ol>	<del></del>
business under the assumed business name:    Name   Complete Address	O DENE
Retail Trade	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	al): _
Secretary of State us  Signature:  Signature:  Signature:  Signature:  Signature:  Signature:  Signature required:  Signature:  Signature required:  Signature:  S	3 () ary of state