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CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly)	
To the SECRETARY OF STATE, STATE Pursuant to Section 53-504, Idaho gives notice of adoption of an Assu	Code, the undersigned CRE LARY OF STORE
 The assumed business name which the business is: 	e undersigned use(s) in the transaction of
RIVER CITY EXPRESS	:
2. The true name(s) and business address business under the assumed business	
Name HOBERT R. ALBISTON	<u>Complete Address</u> 940 SHANNON LANE, POST FALLS ID 83854-600
ROSEANNE R. ALBISTON	940 SHANNON LANE, POST FALLS ID 83854-6000
3. The general type of business transacto (mark only those that apply)	ed under the assumed business name is:
Retail Trade Manufac Wholesale Trade Agricultu Services Construct	re 🔲 Finance, Insurance, and Real Estate
4. The name and address to which future	-
correspondence should be addressed	Submit Certificate of Assumed Business
940 SHANNON LANE	Name and \$20.00 feato:
POST FALLS ID 83854-6000	
5. Name and address for this acknowled	Igment Basement West PO Box 83720
COPY IS (if other than # 4 above).	Boise ID 83720-0080 208 334-2301
· · · · · · · · · · · · · · · · · · ·	I INAN SEIZETARY OF STATE
Signature: proseance & allerte	te -
Printed Name: ROSEANNE R. ALBISTON	- J D15459
Capacity: CO-OWNER (see instruction # 8 on back of form)	- D15459

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