

FILED EFFECTIVE CERTIFICATE OF

ASSUMED BUSINESS NAME JUL -9 AM 8: 40

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

Please type or print legibly.

Instructions are included on back of application.

Packer Elder Care Law	
2. The true name(s) and <u>business</u> address business under the assumed busines Name Esplin & Packer, LLP	ess(es) of the entity or individual(s) doing ss name: <u>Complete Address</u>
Thomas W. Packer	P.O. Box 1022
, = 00	Blackfoot, ID 83221
 Manufacturing Mining Finance, Insurance, and Real I The name and address to which future correspondence should be addresse 	re Secretary of State
Esplin & Packer, LLP	PO Box 83720
P.O. Box 1022	Boise ID 83720-0080 208 334-2301
Blackfoot, ID 83221	200 554-2501
5. Name and address for this acknowle copy is (if other than # 4 above):	dgment
14 2 1120	Secretary of State use only
nature: Thomas W Tacket nted Name: Thomas W Tac	

CK:1118 CT:110084 BH:1432503 $10\ 25.00 = 25.00 \text{ ASSUM NAME } #2$

D172450

Signature:

Printed Name: ____ __

Capacity/Title:____