

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE
DEVIANDE MCCULLOCH ECTIVE
237 841.51.
1DAHO FALLS, ID 83401 /// 9:00

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

1. The assumed business name which the under business is: ———————————————————————————————————	rsigned use(s) in the transaction of
The true name(s) and business address(es) of business under the assumed business name: Name	· · · · · · · · · · · · · · · · · · ·
Dewayne ucculoch	237 6th 5t EDAHO Falls, FD 83/101
3. The general type of business transacted under Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
	Secretary of State use only
Signature: (signature required)	IDAHO SECRETARY OF STATE O7/08/2004 05:00 CK: 272 CT: 150010 BH: 754377 1 @ 25.00 = 25.00 ASSIM MANF # 2
Printed Name: Delbyne McCullach	IDAHO SECRETARY OF STATE 97/08/2004 65:00
Capacity/Title: Owner	CK: 272 CT: 158010 BH: 754377 1 0 25.00 = 25.00 ASSUM NAME # (