

## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned MAR -9 AM 9: 25 submits for filing a certificate of Assumed Business Name.

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

SECRETAIN OF STATE

Big (	City Billiards
2. The true name(s) and <u>business</u> address( business under the assumed business no <u>Name</u> Chester Alan McCord	
The general type of business transacted  Retail Trade Transportati  Wholesale Trade Construction  Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Esta	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:  Chester A McCord  PO Box 3152  Hailey ID 83333	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgm copy is (if other than # 4 above).	nent
nature: MAA. 7C	Secretary of State use only
nted Name: Chester Alan McCord	-
pacity/Title: Owner	_
nature:	- IDAHO SECRETARY OF STATE 03/09/2012 05:
nted Name:	- CX: 1187 CT: 267985 BH: 13 1 @ 25.08 = 25.80 ASSUM N

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