



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned

gives notice of adoption of an Assumed Business Name

98 FEB 18 PM 3:10

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

RIVER CITY PROPERTY MANAGEMENT

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name

Complete Address

TERRY JENKINS

1770 W. STATE ST. #101 ⁸³⁷⁰² BOISE, ID.

MARGARET SANDERS

SAME

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

☐

Retail Trade

☐

Manufacturing

☐

Transportation and Public Utilities

☐

Wholesale Trade

☐

Agriculture

☐

Finance, Insurance, and Real Estate

☒

Services

☐

Construction

☐

Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): _____

RIVER CITY PROPERTY MANAGEMENT

1770 W. STATE #101

BOISE, ID. 83702

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

02/18/1998 09:00
CK: none CT: 94447 BH: 83152

1 @ 20.00 = 20.00 ASSUM NAME

Signature: _____

Margaret Sanders MARGARET SANDERS

Printed Name: TERRY JENKINS

Capacity: owner

(see instruction # 8 on back of form)

D12223