

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 11 DEC 27 AM 9: 17

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

SECRETARY OF STATE STATE OF IDAHO

P	Pickleberrylane
The true name(s) and <u>business</u> address business under the assumed business <u>Name</u> Virginia Bowden	
	ed under the assumed business name is: tation and Public Utilities
☐ Services☐ Manufacturing☐ Mining☐ Finance, Insurance, and Real Est	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Virginia Bowden	450 North 4th Street PO Box 83720
10697 W. Halstead Ln. #101 Boise, Id. 83713	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledge copy is (if other than # 4 above):	gment
gnature: <u>Cirginia Bouden</u>	Secretary of State use only
inted Name: Virginia Bowden	
pacity/Title: Owner	
nature:	
inted Name:apacity/Title:	1DANO SECRETARY OF STATE 12/28/2011 95:00 CK: 112 CT: 158018 BH: 138342

abn.pmd Rev. 07/2010

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