

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Secretary of State

<u>Business Entities</u>

www.idsos.state.id.us/

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

business is:	andersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(e business under the assumed business national Name  Robert Mitchell	es) of the entity or individual(s) doing time: <u>Complete Address</u> 5927 N. Pinegeove Dr. Cola 838/5
<ul><li>☐ Wholesale Trade</li><li>☐ Construction</li><li>☐ Services</li><li>☐ Agriculture</li><li>☐ Manufacturing</li><li>☐ Mining</li></ul>	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  **Robert Mitchell**  \$927 N. Pinegrove be CLA IS \$3815	Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgme COPY is (if other than # 4 above).</li> </ol>	Phone number (optional):  208-699-5181
nature: East N. Miletall	Secretary of State use only  IDAHO SECRETARY OF STATE    2/20/2007 05:00   CK: 2815 CT: 158810 RH: 103433   1 8 25.66 = 25.66 ASSUM NAME
nted Name: Robert H. Mitchell	1 6 52.00 = 52.00 ASSUM NAME