

Printed Name: _ Capacity/Title:__

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 215 MAY -7 PM 41 04 submits for filing a certificate of Assumed Business Name.

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

SECRETARY OF STATE

Woody's Woodworks	
2. The true name(s) and <u>business</u> add business under the assumed business	dress(es) of the entity or individual(s) doing
<u>Name</u>	Complete Address
Cody woody	4802 Adons St. Gordovcity ID
	83777
☐ Retail Trade ☐ Trans ☐ Wholesale Trade ☐ Cons	Submit Certificate of
Finance, Insurance, and Rea	Assumed Business Al Estate Name and \$25.00 fee to:
4. The name and address to which fu correspondence should be address	sed: 450 North 4th Street PO Box 83720 Boise ID 83720-0080
4802 ADMS St	208 334-2301
5. Name and address for this acknow copy is (if other than # 4 above):	rledgment
·	Secretary of State use only
gnature Looks	
gnature: Soly Woody	Secretary of State use only IDAHO SECRETARY OF STATE 05/87/2015 05:00

1)178920