## FILED EFFECTIVE



## **CERTIFICATE OF ASSUMED BUSINESS NAME**

Title 30, Chapter 21, Part 8, Idaho Code.

Signature:

2818 HAR -6 PM 1: 32

	Filing fee: \$25.00.			DY OF STATE	
			SECRETARY OF STATE SECRETARY OF IDAHO ed use(s) in The transaction of business is:		
1.	The assumed business name which the	ındersigned ı	use(s) in <b>The</b>	transaction of busin	ess is:
	E&D LOZANO HA	UDYMAN	,		
_			(\(4-		
2.	The individual and/or entity names and be the assumed business name (do not included)		• •	ose doing business	unaer
	•	-	•	_	
	DAUID         LOZANO         98           (Name)         (Address)           ELISA         LOZANO         (Address)           (Name)         (Address)	S. TAFF	V DR I	VAMPA ID	83687
	EL134 102 000 98	S TACE	V 770	NAMBA ID	23627
	(Name) (Address)		<del></del>	variet in	<u> </u>
	(Name) (Address)				
	(Name) (Address)				
	(Name) (Address)		<del></del>	<del></del>	
3.	The general type of business transacted under the assumed business name is:				
		ruction	c		
	Wholesale Trade Agricu		☐ Irans	sportation and Public	: Oundes
	Services Manufacturing Finance, Insurance, and Rea				Real Estate
		,		,	
		_			
4.	Mailing address for future correspondence	:e: 5.	Name and a copy is (if other	ddress for this ackn	owledgment
			COPY IS (IT OTHE	r than #4).	
	(Name) LOZANO		(Name)		
	(Name) 102 AND (Name) DR				
	(Address)		(Address)		
	Nampa /D 83 (City) (State) (Zip	<u>68</u> 7 ∞de)	(City)	(State)	(Zipcode)
	(		(,,	<b>(</b> = <b>)</b>	<b>(</b>
Prír	ited Name: DAVID Lozanto			Secretary of State use only	
				betretary or otals use only	
Sig	nature: Thys	<del></del>		IDAHO SECRETARY OF	F STATE
Printed Name: Clisa Lozano			03/06/2018 05:00		
	6,			134302 CT:172099 5.00 = 25.00 ASS	
Sig	nature:		*· 5	೯೯೩೮ - ೨೭೮೩೪೮ ನಾಡಬ	was wearen in a
Prir	nted Name:		•	D200904	

Rev. 08/2015

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