

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 08 AUG 15 AM 8: 57

Please type or print legibly. NOTE: See instructions on reverse before filing. SECRETARY OF STATE STATE OF IDAHO

business is:	DIVA
2. The true name(s) and business address(es) business under the assumed business name  Name  Hand S Hernandez	of the entity or individual(s) doing e: Complete Address 314 Bear Cree K_RA Dnogs ±1)
3. The general type of business transacted und  Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Blar Cree K. R.A.  Driggs T.D. 83422	der the assumed business name is:  and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:  Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080  (208) 334-2301
<ol> <li>Name and address for this acknowledgmen copy is (if other than # 4 above):</li> </ol>	nt
	Secretary of State use only
Signature: A signature reddired) nandg  Printed Name: Prin	IDAHO SECRETARY OF STATE  ##################################

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