CERTIFICATE OF ASSUMED BUSINESS NAME

Please type or print legibly.

(see instruction # 8 on back of form)

NOTE: See instructions on reverse before filing.	SECRETARY OF STATE STATE OF IDAHO
1. The assumed business name which the undersigned	•
business is: <u>Alpine Appliance and Refr</u>	igeration
2. The true name(s) and business address(es) of the	
business under the assumed business name: Name	Complete Address
Wisley leon Pierson 2440	osheryllane
Calc	Iwell, in 83607
3. The general type of business transacted under the	assumed business name is:
☐ Retail Trade ☐ Transportation and P	ublic Utilities
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business Name and \$25.00 fee to:
Finance, Insurance, and Real Estate	1
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson
Alpine Appliance & Refrigeration	Basement West PO Box 83720
PO BOX397	Boise ID 83720-0080 208 334-2301
middleton, 100 83 644	200 00-2001
5. Name and address for this acknowledgment	Phone number (optional):
COPY is (if other than #4 above):	8 <u>08-402-010C</u>
Sameas #4	Secretary of State use only
	Secretary of State use only
201.14	
Signature: Leson Loson Signature: Signature required Picrson Signature Representation of the signature required Signature required Signature required Signature Representation of the signature Represen	
Printed Name Wesley Icon Picrson	
Capacity/Title: Duner/opperator	TRAUN DEPOSTABLE DEATE