

Capacity/Title:\_

## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

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

2014 JUL -3 AM 9: 57

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

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the under business is:	ersigned use(s) in the transaction of
The true name(s) and <u>business</u> address(es) business under the assumed business name	
Shawn C. Miller	SIZE 472 + S
	Wardon City ID. 183714
3. The general type of business transacted und  Retail Trade  Transportation a	ler the assumed business name is: and Public Utilities
Wholesale Trade Construction Services Agriculture	- Como Omino
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
The name and address to which future correspondence should be addressed:      A	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	<b>L</b>
- A Al H	Secretary of State use only
Printed Name: Shawa C. Mz/lv	IDAHO SECRETARY OF STATE 07/03/2014 05:00
Capacity/Title: Owner	CK:CASH CT:158010 BH:1431933 16 25.00 = 25.00 ASSUM NAME #
Signature:	TO SECULO ENGINE MEMORIA TO
Printed Name:	1 7 2 2 2 1

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