



# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

REC'D/EFFECTIVE  
01 DEC 19 AM 8:45  
SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction business is:

Big Worm Racing

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
<u>Cody Mitten</u>	<u>291 E. 20th Idaho Falls ID 83404</u>
_____	_____
_____	_____

3. The general type of business transacted under the assumed business name is: (mark only those that apply)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Retail Trade        | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade     | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction  | <input type="checkbox"/> Mining                              |

4. The name and address to which future correspondence should be addressed: Phone number (optional): \_\_\_\_\_

Cody Millen  
291 E. 20th Idaho Falls  
ID 83404

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State  
 700 West Jefferson  
 Basement West  
 PO Box 83720  
 Boise ID 83720-0080  
 208 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature: Cody Millen

Printed Name: Cody Millen

Capacity: owner

(see instruction # 8 on back of form)

Revision 1/88  
s:\compforms\abn.p65

Secretary of State use only

IDAHO SECRETARY OF STATE  
 12/12/2001 05:00  
 CK: 814 CT: 154523 BH: 434029  
 1 @ 20.00 = 20.00 ASSUM NAME # 2

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