

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/EFFECTOR

Pursuant to Section 53-504, Idaho Code, the undersigned Pursuant to Section 53-504, Idano Code, the analysis submits for filing a certificate of Assumed Business Name. 2003 FEB -7 AM 8: 46

Please type or print legibly. NOTE: See instructions on reverse before filing.

SE CENTRY UP STATE

STATE OF IDAHO	
1. The assumed business name which the undersigned use(s) in the transaction of	
hueines is	
Servicios Hispanos De Ido	aho
•	
2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing	
business under the assumed business name:	
<u>Name</u>	Complete Address
	2 (-TV.11 - DI
Maria J Ortiz 2119	9 E. Irving Pl.
<u>Mai</u>	mpa, -Luapo 83686
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and Pub	olic Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$20.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
	Basement West PO Box 83720
Hispanie Services of Idoho	Boise ID 83720-0080
2119 E. Fruing Pl	208 334-2301
Nampa Idaho 83686	
5. Name and address for this acknowledgment	Phone number (optional):
COPY is (if other than # 4 above).	(208) 703-2252
• •	+
2119 & Irving Pl	Secretary of State use only
0111	
Nampa Lounto 83686	

IDAHO SECRETARY OF STATE

02/07/2003 05:00

CK: 889668884 CT: 158010 BH: 661563
1 8 20.00 = 20.00 ASSUN NAME # 2

1)62264

(see instruction # 8 on back of form)

Signature: 4 Mia (Janie) (Irt

Printed Name: Maria

Capacity/Title: <u>Owner</u>