

Capacity/Title: Owner

(see instruction #8 on back of form)

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.

09 JUL 22 AM 8: 39

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

2. The true name(s) and business address(es)	of the entity or individual(s) doing
business under the assumed business name. Name Janice L. Weesner	Complete Address 1023 East E St. Moscow, ID 83843
3. The general type of business transacted under Retail Trade Transportation a	er the assumed business name is:
 ☐ Wholesale Trade ☐ Construction ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	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):	Phone number (optional):
same	Secretary of State use only

1DAHO SECRETARY OF STATE
07/22/2009 05:00
CK: 3753 CT: 150010 BH: 1179713
1.0 25.00 = 25.00 ASSUM NAME # 1