

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

## FILED EFFECTIVE 04 MAY 24 AM 10: 15

SECRETARY OF STATE STATE OF IDAHO

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

The assumed business name which the under business is:  ANSEN'S ROPINS  ANSEN'S ROPINS  AND ANSEN'S ROPINS  AND	rsigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) or business under the assumed business name:  Name  Name	of the entity or individual(s) doing  Complete Address  SOJ SANDY FOAD Are  SAMPA IN 83686
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:    3807   SANDYFORD # AVE   WAMPOR TO BESSEE	Submit Certificate of Assumed Business Name and \$25.00 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 acknowledgmen copy is (if other than # 4 above):  \[ \int_{OS} ePH	Secretary of State use only
Signature: January (signature required)  Printed Name: Joseff HANSEN  Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  95/24/2004 05:00  CK: CASH CT: 158910 BH: 746617  1 8 25.00 = 25.00 ASSUM NAME \$ 2