

227

FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

MAY 21 PM 3:38

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

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

Arrowhead Mountain Village

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

Name

Roberta Byrne Patterson

Complete Address

955 So Main (Cascade, ID 83611)

3. The general type of business transacted under the assumed business name is:

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

4. The name and address to which future correspondence should be addressed:

Roberta B. Patterson
P. O. Box 337
Cascade, ID 83611

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

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):

Unigra Bank
P.O. Box 221
Cascade ID 83611

Secretary of State use only

Signature: Roberta B. Patterson

Printed Name: Roberta B. Patterson

Capacity/Title: Owner

Signature: _____

Printed Name: _____

Capacity/Title: _____

IDAHO SECRETARY OF STATE

05/21/2015 05:00

CR: 2853644 CT: 172093 BH: 1476563
1@ 25.00 = 25.00 ASSUM NAME #2

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