

Printed Name:

Capacity/Title:

(see instruction # 8 on back of form)

## **CERTIFICATE OF** ASSUMED BUSINESS NAMEFILED EFFECTIVE

submits for filing a certificate of Assumed Business Name.

Pursuant to Section 53-504, Idaho Code, the undersigned

Please type or print legibly. NOTE: See instructions on reverse before	e filing. 2005 FEB 16 AM 8: 58
1. The assumed business name which the under business is:  Elmers Asphalt	ersigned use(s) in the transaction of STATE OF IDAHO
2. The true name(s) and business address(es) business under the assumed business name Name  Toffrey Flmer Adaine Elmer	• • • • • • • • • • • • • • • • • • • •
3. The general type of business transacted und  Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	er the assumed business name is: and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  Elmers Asphalt 384 W 70 N BlackFoot, ID	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):  785-5896
Signature: \clip \text{Elme}	Secretary of State use only

IDAHO SECRETARY OF STATE @2/16/2005 @5:00 CK: 88580779 CT: 158010 BH: 793557 1 0 25.00 = 25.00 ASSUM NAME # 2

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