

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED/EFFECTORS

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name 1 NOV 30 75 16

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECKE JARY OF STATE

NOTE: See instructions on reverse below	STATE OF IDANO	
The assumed business name which the und business is:     A.A.A.T. Drywakk	lersigned use(s) in the transaction of	
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name:  Name  Tames R Baum		
Wholesale Trade Construction	der the assumed business name is: and Public Utilities	
☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$20.00 fee to:	
4. The name and address to which future correspondence should be addressed:  1065 E 95 MT. Home 1 83647	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
<ol><li>Name and address for this acknowledgmer copy is (if other than # 4 above):</li></ol>	nt Phone number (optional):	
	Secretary of State use only	
Signature: AMB Bowm  Printed Name: Tames Bowm  Capacity: Ower  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  11/30/2001 05:00  CK: 537 CT: 154109 BH: 432046  10 20.00 = 20.00 ASSUM MANE # 2	

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