

Signature: <u>≺</u>

Printed Name: &

(see instruction # 8 on back of form)

Capacity/Title:

CERTIFICATE OF **ASSUMED BUSINESS NAME**

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned GG DEC -4 PM 2: 04 submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is: 2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name sez 615 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture Services Submit Certificate of Manufacturing Mining **Assumed Business** Name and \$25.00 fee to: Finance, Insurance, and Real Estate Secretary of State 4. The name and address to which future 700 West Jefferson correspondence should be addressed: **Basement West** PO Box 83720 Boise ID 83720-0080 208 334-2301 工人 Phone number (optional): 5. Name and address for this acknowledgment 208-866-6108 CODV IS (if other than # 4 above): Secretary of State use only

IDAHO SECRETARY OF STATE 12/04/2003 05:00 CK: 520 CT: 158010 BH: 714938