

CERTIFICATE OF ASSUMED BUSINESS NAME

(see instruction # 8 on back of form)

227		
	CERTIFICATE OF ASSUMED BUSINESS	· · · · · · · · · · · · · · · · · · ·
	Pursuant to Section 53-504, Idaho Code.	the undersigned
4	submits for filing a certificate of Assumed I	Business Name.
	Please type or print legibly. NOTE: See instructions on reverse befo	ore filing.
1.	The assumed business name which the un business is:	dersigned use(s) in the transaction of
	Dry Gulc	h Recycling
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:		s) of the entity or individual(s) doing
	Name	Complete Address
	Gary Moore	PO Box 33, North Fork ld 83466
4.	The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: PO Box 33 North Fork Id 83466	Submit Certificate of Assumed Business Name and \$20.00 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 acknowledgment copy is (if other than #4 above):	nt Phone number (optional):(208) 865-2100
		Secretary of State use only
Signatı	Ire: 2 (signature required)	IDAHO SECRETARY OF STATE 94/92/2003 95:200 CK: 4422 CT: 15800 SH: 672361 1 8 29.80 : 29.80 SH: 672361
Printed	Name: Gary Moore	IDAHO SECRETARY OF STATE
Capaci	ty/Title: Owner/Proprietor (see instruction # 8 on back of form)	04/02/2003 05:00 CK: 4422 CT: 158010 RH: 672361 1 8 20.00 = 20.00 ASSUM NAME # 2