



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 JUN 15 PM 3:07

SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Eshbach Consulting Services

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

Name

Alicia D. Eshbach

Complete Address

404 Avenue H, Boise ID 83712

- 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 |                          |                                     |

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

Eshbach Consulting Services

404 Avenue H.

Boise, ID 83712

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

Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080

(208) 334-2301

- Name and address for this acknowledgment copy is (other than # 4 above):

Signature: Alicia D. Eshbach

(signature required)

Printed Name: Alicia ESHBACH

Capacity/Title: OWNER

(see instruction # 8 on back of form)

Secretary of State use only

Information Form 50  
Rev. 04/2003

106/15/2010 05:00  
CK: CASH CT: 158818 BH: 1226772  
1 0 25.00 = 25.00 ASSUM NAME #

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