

Capacity/Title / Capacity

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

35 MAR 16 Ph 2: 59

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

SECHRELL OF STATE
STATE OF IDAHO

Falls

Please type or print legibly.

NOTE: See instructions on reverse before filing.

	der the assume	ness address(es ed business nan		entity or individual(s) doing	
Name		Complete Address			
Action Collection Service, Inc.		1325 Vista Ave PO Box 5425 Boise, ID 83705			
<u> </u>		)	11 13th Ave S PO Box 1337 Nampa ID 83651		
			365 Yellowstone PO Box 4088 Pocatello ID 83201		
. The general	type of busine	ss transacted ur	280 Bl nder the a	lue Lakes Blvd N PO assumed business name is:	Box K T
Retail Whole	Trade [	Transportation	n and Put	olic Utilities	
Servic	es	Agriculture		Submit Certificate of	
Manuf	acturing	Mining		Assumed Business	
Financ	e, Insurance, a	and Real Estate		Name and \$25.00 fee to:	
. The name a	nd address to v	which future		Secretary of State	
correspondence should be addressed:				700 West Jefferson	
Action Collection Service, Inc.				Basement West	
PO Box 5425				PO Box 83720 Boise ID 83720-0080	
Boise, ID 83	<del></del>			208 334-2301	
		s acknowledgme	ent	Phone number (optional):	_
copy is (if oth	er than # 4 above):	_		208-345-1750	
				Secretary of State use on	ly
			satuk/2003	Secretary of State use onl	l <b>y</b>

IDAHO SECRETARY OF STATE

93/16/2005 95:00

CK: 48265 CT: 93427 BH: 798983

1 0 25.00 = 25.00 ASSUM MANE # 5

