



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2018 APR 12 AM 9:36

SECRETARY OF STATE
STATE OF IDAHO

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

Advanced Hydraulix

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Michael Coonce

430 Pioneer Path, Twin Falls, ID 83301

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

3. The general type of business transacted under the assumed business name is:

☐ Retail Trade

☒ Construction

☐ Transportation and Public Utilities

☐ Wholesale Trade

☒ Agriculture

☐ Mining

☒ Services

☒ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Michael Coonce

(Name)

430 Pioneer Path

(Address)

Twin Falls

ID

83301

(City)

(State)

(Zipcode)

5. Name and address for this acknowledgment copy is (if other than # 4):

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Michael Coonce

Signature:

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

04/12/2018 05:00

CK:1023 CT:262293 BH:1638000

1@ 25.00 = 25.00 ASSUM NAME #2

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