

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED/EFFECTIVE

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

01 MAR 23 AN 9: 20

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

STATE DE IDALIO

1. The assumed business name which the under business is:  **B	
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name:  Name  STEVEN W. CARROLL DIANNA L. CARROLL	the entity or individual(s) doing  Complete Address  15 /2 E. PARK KELLOGG, T.P.
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  \$\int \textit{TEVEN W. CARROLL ISSES 7}\$  5. Name and address for this acknowledgment copy is (if other than #4 above):	
Printed Name: STOVEN W. CARRILL Capacity: OWNER	Secretary of State use only  IDAHO SECRETARY OF STATE  03/30/2001 09:00  CK: 5866 CT: 144323 BH: 387938  1 P 20.00 = 20.00 ASSUM NAME # 2  D4 3974