



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

2017 MAY -1 AM 11: 15

SECRETARY OF STATE
STATE OF IDAHO

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

Beckvoid M H P

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):

Bruce Beckvoid 506 Bobcat Lane Elk River, Id 83827
(Name) (Address)

Sandra Beckvoid 506 Bobcat Lane Elk River, Id 83827
(Name) (Address)

(Name) (Address)

(Name) (Address)

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

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Construction	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Mining
<input type="checkbox"/> Services	<input type="checkbox"/> Manufacturing	<input checked="" type="checkbox"/> Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Sandra Beckvoid
(Name)

P. O. Box 141
(Address)

Lewiston, Id 83501
(City) (State) (Zipcode)

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

(Name)

(Address)

(City) (State) (Zipcode)

Printed Name: Bruce Beckvoid

Signature: Bruce Beckvoid

Printed Name: Sandra Beckvoid

Signature: Sandra Beckvoid

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

05/01/2017 05:00

CK:4810 CT:338865 EH:1561752
10 25.00 = 25.00 ASSUM NAME #2

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