

(see instruction # 8 on back of form)

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

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

10 MAY 17 AM 9: 24

Please type or print legibly. NOTE: See instructions on reverse before filing. SECRETARY OF STATE STATE OF IDAHO

EXPLIC	CIT INK
The true name(s) and business address(es) business under the assumed business name Name     Wade Rutherford	of the entity or individual(s) doing e: Complete Address 921 Main St. Buhl, ID 83316
3. The general type of business transacted und	
<ul> <li>✓ Retail Trade</li></ul>	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
5. Name and address for this acknowledgmen copy is (if other than # 4 above).	
gnature: White Control (signature required) wade Rutherford	Secretary of State use only  Secretary of State use only  Secretary of State use only  IDANO SECRETARY OF STATE  G5/17/2010 95 = 06  CX: 2778183782 CT: 158818 BH: 122  1 P 25.89 = 25.69 ASSIM NAME