

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

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

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

The assumed business name which the under business is:  ASSURAM (4)	signed use(s) in the transaction of
2. The true name(s) and business address(es) of business under the assumed business name:  Name  Sandie J. Royce	the entity or individual(s) doing  Complete Address P.O. Box 781  Eagle, Idaho 83(e16
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:    Assurance	
Signature: Signature required)  Printed Name: Savdie T Koyce  Capacity/Title: Owner  (see instruction # 8 on back of form)	Secretary of State use only  IDAHO SECRETARY OF STATE  O1/02/2008 05:00  CK: 1146 CT: 221038 BH: 1092499 1 8 25.90 = 25.90 050194 Monte # 4

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