

**CERTIFICATE OF ASSUMED BUSINESS NAME**

(Please type or print legibly. See instructions on reverse.)



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name:

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

Poly Form

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Gorka L. Legarreta 2025 Palouse Boise ID 83705

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

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

4. The name and address to which future correspondence should be addressed:

Taxman Plus2721 BroadwayBoise ID 83706Phone number (optional): (208) 384-5227

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

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only

Signature:

Gorka Legarreta

Printed Name:

Gorka Legarreta

Capacity:

Owner

(see instruction #8 on back of form)

IDAHO SECRETARY OF STATE

11/04/1997 09:00  
CK: 1232 CT: 89376 BH: 52587

1 @ 20.00 = 20.00 ASSUM NAME

D 9475