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CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse be	fore filing.
1. The assumed business name which the ubusiness is:	undersigned use(s) in the transaction of
2. The true name(s) and business address(e business under the assumed business na Name	Complete Address 1163 E. 3800 N. Bulk, Sk 83312
3. The general type of business transacted u Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business
5. Name and address for this acknowledgment copy is (if other than #4 above): D.L. Evans Bank 980 S. Linicht Javane, D.L. \$3335	nt Phone number (optional): ———————————————————————————————————
Signature: Signature: Signature required) Printed Name: Frank Sousa Capacity/Title: (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE ##################################