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Capacity/Title:



## **CERTIFICATE OF ASSUMED BUSINESS NAME**

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

## FILED EFFECTIVE

2016 SEP 21 PM 12: 24

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

1. The assumed business name which business is:	ch the undersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> ad business under the assumed business when the assumed business and the business and b	Idress(es) of the entity or individual(s) doing ness name:  Complete Address  531 N. Copper River De  Manifer I 3365
Retail Trade Trans Wholesale Trade Cons	Assumed Business
4. The name and address to which fur correspondence should be address  Watt Espery  531 N Coppus River  Names T. 3365-1	sed:  450 North 4th Street  PO Box 83720  Boise ID 83720-0080
5. Name and address for this acknow copy is (if other than # 4 above):	/ledgment
	Secretary of State use only
Signature: Month	IDAHO SECRETARY OF STATE
Printed Name: Matt Esper	09/21/2016 05:00
Capacity/Title: Divice	CK: 4222200 CT: 172099 BH: 154734 10 25:00 = 25:00 ASSUM NAME #2
Signature:	
Printed Name:	— D189323
Conneity/Titles	

abn.pmd Rev. 07/2010