

Capacity/Title:

(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 Nameanna SEP 39 (# 9: 20

20.00 ASSUM NAME

58652

	Please type or print legibly.
NOTE:	See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: MINIFACTURINS 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining **Assumed Business** Finance, Insurance, and Real Estate Name and \$20.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 700 West Jefferson **Basement West** PO Box 83720 Boise ID 83720-0080 208 334-2301 5. Name and address for this acknowledgment Phone number (optional): CODY is (if other than # 4 above): Secretary of State use only IDAHO SECRETARY OF STATE **Printed Name:** 89/30/2002