

CERTIFICATE OF ASSUMED BUSINESS NAME

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

27		TIED EFFECTIVE
	CERTIFICATE OF	20/3
	ASSUMED BUSINESS NA Pursuant to Section 53-504, Idaho Code, the under submits for filing a certificate of Assumed Business	rsigned S
Please type or print legibly. Instructions are included on back of application.		
	The assumed business name which the undersign business is:	ned use(s) in the transaction of
	Mediatues	
 The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: 		
	Name	Complete Address
	· ·	300 N. COLE RD #K305
		8015E, ID 83704
	The general type of business transacted under the Retail Trade Transportation and F Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Same as alone	
	Name and address for this acknowledgment copy is (if other than # 4 above): Same as above	
		Secretary of State use only
Signat	ture: Duck	
Printed Name:		
Capacity/Title: Dunes / Director		IDAHO SECRETARY OF STATE 04/03/2013 05:00
CK: 1349149 CT: 172899 BH: 136778		CK: 1349149 CT: 172899 BH: 1367786
Printed Name: Capacity/Title:		D162256

abn.pmd Rev. 07/2010