

Printed Name: Bryan

(see instruction #8 on back of form)

Capacity: OWNER

CERTIFICATE OF ASSUMED BUSINESS NAME

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

O2 JAN -4 AM 9: 00

SECRETARY OF STATE
STATE OF IDAHO

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:	
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Bryan Deweese 146 Bo	entity or individual(s) doing Complete Address 9 So. Ponderuy Raid ISE, Idaho 83705
3. The general type of business transacted under the Retail Trade Transportation and F Wholesale Trade Construction Wholesale Trade Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: Bryan Deweese 1409 So. Ponderay Rd Boise, Idaho 83705	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above): Bryan Dewese 1409 So. Ponderay Rd. Boise, Tdaho & 3 705	Phone number (optional): 208-602-4355 Secretary of State use only
Signature:	

Revised 01/2001

Engineer

IDAHO SECRETARY OF STATE

01/04/2002 05 = 00

CK: 1277 CT: 155296 BH: 438847

0 20.00 = 20.00 ASSUM NAME # 2

D 50853