

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

## FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 11 JUN -6 PM 1:59

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

(see instruction # 6 on back of form)

SEGRE BY OF STATE
STATE OF IDAHO

	SIA: CI ILIARO
1. The assumed business name which the unders	signed use(s) in the transaction of
business is:	
Sky Line Partership	
.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
	572 West Broadway
Zmily Christophile	
· ·	Idalofalls, Talelia
	83402
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3. The general type of business transacted under	the assumed business name is:
	of Dublic Militiae
Retail Trade Transportation an	d Public Utilities
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
	Name and \$25.00 fee to:
Finance, Insurance, and Real Estate	
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
	PO Box 83720
Emily Christopher	Boise ID 83720-0080
471 Hollow DR. Idoholells	208 334-2301
Phoho 83401	
	Phone number (optional):
5. Name and address for this acknowledgment	
COPY IS (If other than # 4 above):	208) 201-8470
	Secretary of State use only
Signature: Jany huluphu	<b>E</b>
(Signature required)	IDAHO SECRETARY OF STATE  95 96/97/2011 95=99
Printed Name: Christopher	IDAHO SECRETARY OF STATE  96/97/2011 05:00  CK: 7355 CT: 259557 BH: 1277131
Capacity/Title: Owner	IDAHO SECRETARY OF STATE    06/07/2011 05:00
Capacity/ Inte.	