

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

10 JAN -7 AM 8:41

SECRETARY OF STATE STATE OF IDAHO

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

Allen Appra	isal Idaho
The true name(s) and business address(es) of business under the assumed business name Name Cindy Longnecker-Allen	
Jeff Allen	983 N Pinnacle Way Eagle Id 83616
The general type of business transacted under Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
 Name and address for this acknowledgmen copy is (if other than # 4 above). 	t ·
	Secretary of State use only
nature: C. Longrecker-Allen ted Name: Cindy Longnecker-Allen pacity/Title: Owner (see instruction # 8 on back of form)	Socious Control of State

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