

Capacity/Title:

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.

2013 JUL 26 AM 10: 41

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

SECRETARY OF STATE STATE OF IDAHO

		O PARE OF TOTAL	
 The assumed business n business is: 	ame which the undersign	ed use(s) in the transaction of	
CONANT ENTO	ERPRISES		
The true name(s) and <u>bu</u> business under the assur		entity or individual(s) doing	
<u>Name</u>		Complete Address	
TRAVIS CONF	INT 20	8 ABRAHAM WAY ApT#102	
		DWECK \$10 83607	
The general type of busing Retail Trade	ness transacted under the	assumed business name is:	
Wholesale Trade Services Manufacturing Finance, Insurance	Construction Agriculture Mining	Submit Certificate of Assumed Business Name and \$25.00 fee to:	
4. The name and address to correspondence should to TRAUTS CONANT 708 ABRAHAN WAY CALOWELL ID, TO	oe addressed: Aot-⊭102	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
5. Name and address for th copy is (if other than # 4 above):		·	
		Secretary of State use only	
Signature: As Cult			
Printed Name: TRAUTS (DNANT		
Capacity/Title: OWNER		IDAHO SECRETARY OF STATE	
Signature:		07/26/2013 05:00 CK: CASH CT: 158810 BH: 1383749	
Printed Name:		1 8 25.80 = 25.00 ASSUM NAME # 2	

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