

Printed Name: MATT HUSAK

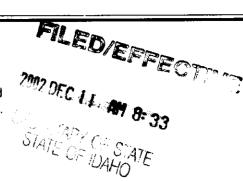
(see instruction # 8 on back of form)

Capacity/Title: <u>ひいか</u>

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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



D60611

MR INRENCH		
The true name(s) and <u>business</u> address(es business under the assumed business name Name MATT HUNKE	ie:	Complete Address HETURICH W.
The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture		
ManufacturingMiningFinance, Insurance, and Real Estate		Assumed Business Name and \$20.00 fee to:
The name and address to which future correspondence should be addressed: MATT HUMAN PO BOX ZOZB NUCKL, DO 33638		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent	Phone number (optional):
		Secretary of State use only
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nature:	7 forms Wabn. p65	