

Printed Name:

Capacity/Title:_

9/21/2012

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

1. The assumed business name which the undersigned use(s) in the transaction of

FILED EFFECTIVE

2015 JUL -2 PM 2: 43

SECRETARY OF STATE STATE OF IDAHO

D180085

Please type or print legibly.

Instructions are included on back of application.

 The true name(s) and <u>business</u> address(es) of the obusiness under the assumed business name: 	entity or individual(s) doing
<u>Name</u>	Complete Address
	N. CHATTGETON WAY
<u> </u>	DIKE 1D 83713
. The general type of business transacted under the	assumed business name is:
	blic Utilities - TAX (
☐ Wholesale Trade ☐ Construction	
Services Agriculture	
☐ Manufacturing ☐ Mining	Submit Certificate of
Finance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
. The name and address to which future	
correspondence should be addressed:	Secretary of State 450 North 4th Street
MDO JURIC	PO Box 83720
3362 N. CHATTERTON WAY	Boise ID 83720-0080
BOINE 12 83713	208 334-2301
. Name and address for this acknowledgment	
copy is (if other than #4 above):	
	Secretary of State use only
nature: Mijo Turio	
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pacity/Title: //// Owner	07/02/2015 05:0 CK:CASH CT:158010 BH:14

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