

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

## FILED EFFECTIVE 2014 MAR 21 AM 9: 00

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 befor	re filing.
<ol> <li>The assumed business name which the und business is:</li> </ol>	dersigned use(s) in the transaction of
ISU INSURANCE SERVICES -	3Acorn Agency
2. The true name(s) and business address(es) business under the assumed business name Name  HADDOCK COMPANY INC.  (082718)  3. The general type of business transacted under the assumed business address(es) business add	of the entity or individual(s) doing e:  Complete Address  201 E. 4th AVE.  Post Fauls , IDAHO 83854  der the assumed business name is: and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street
HADDOCK COMPANY INC. 1311 NORTHWOOD CENTER CT. COEUR D'ALENE, IDAHO 83814	PO Box 83720 Boise ID 83720-0080 (208) 334-2301
<ol> <li>Name and address for this acknowledgment copy is (if other than # 4 above):</li> </ol> SAME A5 # 4	nt .
	Secretary of State use only
Signature: Sandy Signature required:  Printed Name: SANDY Fortile:	Source (Supplementary of State
(see instruction #8 on back of form)	6 CK: 25470 CT: 218949 RH: 1416483