

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.

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

Capacity/Title:___

11 AUG 26 AM 9:00

SECEL BY OF STATE

F	Posters 4 Pennies
The true name(s) and <u>business</u> address business under the assumed busines <u>Name</u>	ess(es) of the entity or individual(s) doing ss name: <u>Complete Address</u>
Robert Jacobson	2048 Arborcrest Road
	Moscow, ID 83843
3.5	ture Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed. Robert Jacobson. 2048 Arborcrest Road.	Cedictary or Clare
Moscow, ID 83843	
5. Name and address for this acknowle copy is (if other than # 4 above):	edgment Secretary of State use only
gnature: Robert Jacobson	
nted Name: Robe(t Jacobson	
pacity/Title: Owner	
nature:	{
inted Name:	08/26/2011 05:00 CK: 1362 CT: 158919 BH: 12888
	1 8 25.00 = 25.00 ASSUM MANE

abn.pmd Rev. 07/2010

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