

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.

10 APR 30 AM 8: 39

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

SECRETARY OF STATE

	STATE OF IDAHO	•.
1. The assumed business name which the undersigned	i use(s) in the transaction of	2 ~
business is: The Polished P	up	
The true name(s) and business address(es) of the elbusiness under the assumed business name:	ntity or individual(s) doing Complete Address	
Robert W Hendrickson 70		
	83401	
3. The general type of business transacted under the a	ssumed business name is:	
Retail Trade Transportation and Pub Wholesale Trade Construction	olic Utilities	I .
Services Agriculture	Submit Certificate of	
☐ Manufacturing☐ Mining☐ 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 700 West Jefferson Basement West	
Palished Pup	PO Box 83720	
Attn: Diana	Boise ID 83720-0080 208 334-2301	
5. Name and address for this acknowledgment	Phone number (optional):	
COPY IS (if other than #4 above):	208 390 100	5
	Secretary of State use only	3
90d t		
Signature:		
Printed Name: Robert W Hendrides		
Capacity/Title: Owner/Operator	IDAHO SECRETARY OF	STATE

19940 SECRETARY OF STATE 955/03/2010 95:00 CX: 3156 CT: 158818 34: 1228275 1 8 25.08 = 25.08 ASSUM NAME #