

CERTIFICATE OF ASSUMED BUSINESS NAME

2015 FEB 24 PM 4: 01

SECRETARY OF STATE STATE OF IDAHO

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.

The true name(s) and <u>business</u> address(es) of the business under the assumed business name:	entity or individual(s) doing
Agustin Garcia Rojo 30	Complete Address 7 NKhball # 17 5e 10 83704
The general type of business transacted under the Retail Trade Transportation and F Wholesale Trade Construction Services Agriculture	
Services	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Austin Garcia Rgo 2037 NKimkell H I T	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):	
	UNISH BUT

Printed Name: Agustin Garcia Rojo Capacity/Title: OWner Signature: ____ Printed Name:

Capacity/Title:

abn.pmd Rev. 07/2010

IDAHO SECRETARY OF STATE 02/24/2015 05:00

CK:CASH CT:158010 BH:1463280 16 25.00 = 25.00 ASSUM NAME #2

D 177019

9/21/2012