

FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

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 before filing.

MAR 16 PM 1:56

SECRETARY OF STATE
STATE OF IDAHO

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

STUFF N. GO STORAGE

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
<u>Cecil Hill</u>	<u>3858 Pioneer RD</u>
<u>Evelyn Hill</u>	<u>Homedale, ID</u>
<u>Both SAME</u>	<u>83628</u>

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

Cecil Hill
3858 Pioneer RD
Homedale, ID
83628

5. Name and address for this acknowledgment copy is (if other than #4 above):

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

(208) 337-4894

Secretary of State use only

Signature: Cecil R. Hill

(signature required)

Printed Name: Cecil R. Hill

Capacity/Title: OWNER'S

(see instruction # 8 on back of form)

Information Form 1001-105
Revised 04/2003

IDAHO SECRETARY OF STATE
03/16/2007 05:00
CK: 249 CT: 158010 BH: 1040511
1 @ 25.00 = 25.00 ASSUM NAME # 1

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