

CERTIFICATE OF ASSUMED BUSINESS NAME

NAME FILED EFFECTIVE
e undersigned usiness Name.
lication.
dersigned use(s) in the transaction of
10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Alty 000
of the entity or individual(s) doing
e:
Complete Address
PO.Box 517
205 BARBARA Pd
Middleton, ID. 83644
der the assumed business name is:
and Public Utilities
Submit Certificate of
Assumed Business
Name and \$25.00 fee to:
Secretary of State
450 North 4th Street PO Box 83720
Boise ID 83720-0080
208 334-2301
t
Secretary of State use only
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IDAHO SECRETARY OF STATE
01/02/2013 05:00 CK: 15193 CT: 107839 BH: 1353741

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