

Capacity/Title:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

10 FEB 24 PH 2: 02

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.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersign business is: Rocky Mountain OR	
2. The true name(s) and business address(es) of the business under the assumed business name: Name Pressylvensel	e entity or individual(s) doing Complete Address Po Box /3// Eagu ld 83/0/16
3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities	
 Wholesale Trade ☐ Construction Services ☐ Agriculture Manufacturing ☐ Mining Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Po Box 1311	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
5. Name and address for this acknowledgment	(208) 334-2301
COPY is (if other than # 4 above).	Secretary of State use only
Signature: Signature: Signature required: Printed Name: Signature required: Printed Name: Signature required: Signatur	P137158

IDAHO SECRETARY OF STATE

62/24/2616 95:06

CK: 392881 CT: 172899 8H: 1289587
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