

## **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.

08 MAY 13 PH 1: 09

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

heroe	
The true name(s) and business address(es) of business under the assumed business name:     Name     brian bergin	Complete Address 307 n. kansas ave
	Fruitland, Idaho 83619
3. The general type of business transacted under  Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Heroes	
307 n. kansas ave fruitland, idaho 83619	(208) 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State use only
8	
nature: 1313	
nature:	
acity/Title: owner	
(see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE
2 Out back of formy	05/13/2008 05:( CK: 6378 CT: 158010 BH: 111/

1 8 25.80 = 25.00 ASSUM MANE # 2