

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

11 JUN 23 AM 9: 43

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of app	lication.
The assumed business name which the undoposition business is:     Atwood Apartme.	
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name  Mary So Kyon les  Randy Atwood	
3. The general type of business transacted un Retail Trade Transportation 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:  Mary Jo Kmwle  480 Hwet Dr Maran	Secretary of State 450 North 4th Street PO Box 83720
Name and address for this acknowledgment copy is (if other than # 4 above):	nt
Signature: Mary Jo Knowla Printed Name: Mary So Knowla	Secretary of State use only
Capacity/Title: Owner Signature: Randy Atwood	IDAHO SECRETARY OF STATE  96/23/2011 95:00  CK: 1783 CT: 158818 BH: 1279589  1 8 25.80 = 25.88 ASSUM NAME # 2
Capacity/Title: <u>(XV) P P P</u>	D148512