227	<b>A</b>
CERTIFICATE O ASSUMED BUSINE Pursuant to Section 53-504, Idaho Cod submits for filing a certificate of Assume Please type or print legibly NOTE: See instructions on reverse b	SS NAME SECRETAN B AN ID: SO
1. The assumed business name which the business is:	
2. The true name(s) and <u>business</u> address business under the assumed business in <u>Name</u> <u>Glenn Meurs</u>	
<ul> <li>Wholesale Trade</li> <li>Wholesale Trade</li> <li>Construction</li> <li>Services</li> <li>Agriculture</li> <li>Manufacturing</li> <li>Mining</li> <li>Finance, Insurance, and Real Estant</li> <li>The name and address to which future correspondence should be addressed:</li> <li><u>Clenn Meurs</u></li> <li><u>So6 N. 7+n St.</u></li> </ul>	tion and Public Utilities on Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: <u>Slem Meurs</u> , (signature required) Printed Name: <u>Glenn Meurs</u> Capacity/Title: <u>Owner</u> (see instruction # 8 on back of form)	Secretary of State use only           Secretary of Secretary of State use only           Secretary of Secretary of Secretary of Secretary           Secretary      <