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.

2503 DEC 18 AM 8: 53

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

	OTATE OF IDAHO
 The assumed business name which the under business is: 	signed use(s) in the transaction of
ModerCover Painted Furnit	Luce
TIMORI (BUC) James Co Farmi	
2. The true name(s) and business address(es) o	f the entity or individual(s) doing
business under the assumed business name: Name	Complete Address
,	501 Meadow Dr
Nellie R ZACH Michael A TACH	Juliaetta ID 83535
MICHAEL A CACH	Charles, In 80000
The general type of business transacted under	er the assumed business name is:
Retail Trade Transportation a	nd Public Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
Nellie R. ZACH	Basement West PO Box 83720
1.0. Box 384	Boise ID 83720-0080
Juliacha, ID 83535	208 334-2301
5. Name and address for this acknowledgment	Phone number (optional):
COpy is (if other than # 4 above):	308-276-3938
,	<u> 300 8/0 110</u> 0
	Secretary of State use only
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1 1 1 1 1	9 2.
gnature: (signature required)	(2003
inted Name: Nellie R. Zach	Social Control of State 12/18/2003 05-0
apacity/Title: OwnEL	IDAHO SECRETARY OF STATE
(see instruction # 8 on back of form)	CK: 614 CT: 158010 BH: 71747
	1 @ 25.00 = 25.00 ASSUM NAME