

Signature:____

CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.



			OF OF STATE
1. The assumed business na	me which the undersign	ed use(s) in the transac	11 12 11 12 11 12
<u>Ruggeo</u>	L Reality I	daho	
2. The individual and/or entit the assumed business na <u>Ingalisa</u> You (Name)	me (do <u>not</u> include the name	you listed in #1):	
(Name)	(Address)		
(Name)	(Address)		
(Name)	(Address)		
3. The general type of busine Retail Trade Wholesale Trade Services	ess transacted under the Construction Agriculture Manufacturing	☐ Transportatio	ne is: n and Public Utilities rance, and Real Estate
4. Mailing address for future Tugalisa Youv (Name) POBOX 575 (Address) Bonners Ferry (City)	nger	5. Name and address copy is (if other than # 4). (Name) (Address)	for this acknowledgment (State) (Zipcode)
Printed Name TNGALIS	a Younger	Secretary	of State use only
Signature: Printed Name: Signature:	<u>u</u>	02/2° CK:1276 CT	ECRETARY OF STATE 7/2017 05:00 :335103 BH:1570712 25.00 ASSUM NAME #:
Printed Name:			00112-
Signature:		D192437	

Rev. 08/2015