

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/EFFECTIVE

D 53723

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name R - 8 PH 2: 33

Please type or print legibly.

IOTE: See instructions on reverse before filing: STATE OF IDAHO

NOTE: See instructions on reverse perc		STATE OF IDAHO	
 The assumed business name which the un business is: 	dersigne	u-use(s) in the transaction of	
IdAho City Stage		_	
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name Dave Inga IIs	e:	Complete Address	14
3. The general type of business transacted un	nder the a	assumed business name is:	
Retail Trade Transportation Wholesale Trade Construction	n and Pul	olic Utilities	
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate		Submit Certificate of Assumed Business Name and \$20.00 fee to:	
4. The name and address to which future correspondence should be addressed:		Secretary of State 700 West Jefferson Basement West	
DAVE Ingalls 214 Concord ST Widdleton, Id 83644		PO Box 83720 Boise ID 83720-0080 208 334-2301	
5. Name and address for this acknowledgme	ent	Phone number (optional):	
COPY IS (if other than # 4 above):		585-2460	
		Secretary of State use only	
Signature: Dave Ingalla Printed Name: Dave Inga 1/5 Capacity: Owner	'voopvloms\abn forms\abn.p65 Revised 01/2001	IDAHO SECRETARY OF STATE 94/09/2002 05:00 CK: 3109 CT: 158010 BH: 457768 1 0 20.00 = 20.00 ASSUM NAME #	2

(see instruction # 8 on back of form)