

CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 JUN -6 PM 2 04

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRE CY OF STATE

LISA Alger	
The true name(s) and business address(establishess under the assumed business names.	• • • •
Name	Complete Address
Alison T. Alger	901 E. Warm Springs Ave
	Post Falls 10 83854
	703/ 74/13 , 10 0363 7
3. The general type of business transacted ur	nder the assumed business name is:
	n and Public Utilities
Wholesale Trade Construction	,
Services	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
Tillance, insulance, and iteal Estate	
4. The name and address to which future	idaho Secretary of State 450 N 4th Street
correspondence should be addressed:	PO Box 83720
	Boise ID 83720-0080
LISA Alger	20100 12 20120 0000
901 E. Warm Springs AVE	(208) 334-2301
· / 4	
Post Falls, ID 83854	
5. Name and address for this acknowledgme	ent
CODY IS (if other than # 4 above):	
	Secretary of State use only
	\$9d1
nature: alison T, alaer _	IDAHO SECRETARY OF STATE
(signature required)	06/06/2011 05:00 06/06/2011 05:00 CK: 1285 CT: 259526 BH: 127696 1 0 25.00 = 25.00 ASSUM NAME
nted Name: Alisov T, Alger	CK: 1285 CT: 259526 BH: 127698
	IDAHO SECRETARY OF STATE 06/06/2011 05:00 CK: 1285 CT: 259526 BH: 127696 1 0 25.00 = 25.00 ASSUM NAME
pacity/Title: <u>Legal Transcription/3</u> 7	D lugnac
(see instruction # 8 on back of form)	