Signature:\_\_\_\_

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED EFFECTIVE

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

Filing fee: \$25.00.

2017 APR 17 AM 10: 40

1	SECRETARY OF STATE The assumed business name which the undersigned use(s) in the transaction of business.	
١.	OLIVER REPAIR	grica aso(s) in the transaction of saciness is.
	OLIVEI / III	
2.	The individual and/or entity names and business the assumed business name (do <u>not</u> include the national occupance)  OLIVER TREE SERVICE 1077 MOUNTAIN (Address)	me you listed in #1):
	(Name) (Address)	
	(Name) (Address)	
	(Name) (Address)	
<ol> <li>4.</li> </ol>	Retail Trade ☐ Construction☐ Wholesale Trade ☐ Agriculture☐ ☐ Manufacturin☐ Mailing address for future correspondence:  TYRELL R OLIVER (Name) PO BOX 342 (Address)	<ul><li>Transportation and Public Utilities</li><li>Mining</li></ul>
	CLARK FORK ID 83811 (City) (State) (Zipcode)	(City) (State) (Zipcode)
Pr	inted Name: TYRELL R OLIVER	Secretary of State use only
Si	gnature: R. Olive	IDAHO SECRETARY OF STATE
Pr	inted Name:	04/17/2017 05:00 CK:833461 CT:312746 BH:1579549
Signature:		16 25.00 = 25.00 ASSUM NAME #2
Pr	inted Name:	0123759

Rev. 08/2015