

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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



1. The assumed business name which the un business is:	dersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name Daniel Brent Saxton Rebecca Lynn Herderson	s) of the entity or individual(s) doing ne: <u>Complete Address</u> <u>3137 5, APPL Rd. Boise, FO83704</u>
3. The general type of business transacted un Retail Trade	der the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	Phone number (optional): 42 6 - 0949
Signature:	Secretary of State use only \[\begin{align*} TQQQQQQQQQQQQQQQQQQQQQQQQQQQQQQQQQQQQ