

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.

(see instruction # 8 on back of form)

OT AUG 23 AM 8:21
SECRETARY OF STATE
STATE OF IDAHO

D114444

The true name(s) and business address(business under the assumed business na	(es) of the entity or individual(s) doing name:
Name	Complete Address
Dane Tye	407 CONIAL ST MARCHIG
	TO 83639
The general type of business transacted in the second	Under the assumed business name is:
☐ Retail Trade☐ Transportation☐ Wholesale Trade☐ Construction	ion and Public Utilities
Services Agriculture	
☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estat	
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
Dan Tu	Basement West PO Box 83720
HOT Canal St	Boise ID 83720-0080
Marsing 7d 83639	208 334-2301
5. Name and address for this acknowledgm	ment Phone number (optional):
CODY IS (if other than # 4 above).	
CODY IS (if other than # 4 above).	· · · · · · · · · · · · · · · · · · ·
CODY IS (if other than # 4 above).	Secretary of State use only
CODY IS (if other than # 4 above).	Secretary of State use only 20 20 20 20 20 20 20 20 20 20 20 20 20