

ASSUMED BUSINESS NAME **CERTIFICATE OF**

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

2015 HAY 11 AM 10: 27

Please type or print legibly. Instructions are included on back of application.

	SIAIL OF ISTURO
The assumed business name which the understanding business is:	signed use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name (arol Miller 6	the entity or individual(s) doing Complete Address 2900 Government Way CAA ID. 83814
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: (arol Miller 9861 W Riverview Dr. Cocur d'Alene ID 83814	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above).	
	Secretary of State use only
Signature: <u>Carol Miller</u> Printed Name: <u>Carol Miller</u> Capacity/Title: Signature:	IDAHO SECRETARY OF STATE 05/11/2015 05:00 CK:3187 CT:310089 BH:1475003 16 25:00 = 25:00 ASSUM NAME #
Printed Name:	D178949

Capacity/Title: