227



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2815 APR 23 AM 8: 42

SECRETARY OF STATE STATE OF IDAHO

D178539

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

The true name(s) and business address business under the assumed business	s(es) of the entity or individual(s) doing name:
Name	Complete Address
Forcest Walker	P.O. Box 466
	Cocolalle, ID
The general type of business transacte	d under the assumed business name is:
	ation and Public Utilities
Wholesale Trade Construct	
Services Agricultur	e Submit Certificate of
Manufacturing Mining	Assumed Business
☐ Finance, Insurance, and Real Es	tate Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street
P.O. Box 466	PO Box 83720 Boise ID 83720-0080
Cocolalla, ID	_ 208 334-2301
83813	
Name and address for this acknowledg	ment
COPY IS (if other than # 4 above);	
	_
	_
	Secretary of State use only
nature: Walkly	_
nted Name: Forrest Walker	IDAHO SECRETARY OF STATE
	04/02/0045 05 00
	04/23/2015 05:00
pacity/Title: Owner water	CK:9158 CT:309348 BH:1472

aho and Rev 07/201

Capacity/Title: Ownes