



# CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.  
Filing fee: \$25.00.

**FILED EFFECTIVE**

2015 AUG -6 AM 9:11

SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Idaho Falls Composite High School Team

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Troy Clark  
(Name)

1009 Vine Ave  
(Address)

Idaho Falls  
(City)

ID 83402  
(State) (Zipcode)

N/A  
(Name)

N/A  
(Address)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address)

3. The general type of business transacted under the assumed business name is:

- Retail Trade
- Wholesale Trade
- Services
- Construction
- Agriculture
- Manufacturing
- Transportation and Public Utilities
- Mining
- Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Troy Clark  
(Name)

1009 Vine Ave  
(Address)

Idaho Falls  
(City)

ID 83402  
(State) (Zipcode)

5. Name and address for this acknowledgment copy is (if other than # 4):

Same as # 4  
(Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Zipcode)

Printed Name: Troy Clark

Signature: [Handwritten Signature]

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

08/06/2015 05:00

CK:117 CT:313163 BH:1486957  
1@ 25.00 = 25.00 ASSUM NAME #2

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