

## CERTIFICATE OF FILED EFFECTIVE ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 11 MAY 19 AM 9: 24

Please type or print legibly. Instructions are included on back of application. SECRETARY OF STATE STATE OF IDAHO

The true name(s) and <u>business</u> address business under the assumed business in	
<u>Name</u>	Complete Address
JOSEPH BYERS	PO.BOX/D28, VICTOR, ID 83455
CRYSTAL BYERS	PO BOX 1028, VICTOR, ID 83455
. The general type of business transacted	d under the assumed business name is:
_ ·	tion and Public Utilities
Wholesale Trade Constructi	on
✓ Services	
☐ Manufacturing ☐ Mining	Submit Certificate of
Finance, Insurance, and Real Est	Assumed Business ate Name and \$25.00 fee to:
	realite and \$25,00 fee to.
. The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street
JOSEPH BYERS	PO Box 83720
P.O. BOX 1028	Boise ID 83720-0080 - 208 334-2301
VICTOR, ID 83455	200 334-2301
Name and address for this acknowledge	ment
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	Secretary of State use only
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acity/Title: QWYER	_
ature:	
ed Name: Crustal Byers	IDAHO SECRETARY OF STATE
	_ 05/19/2011 05 <u>:</u>

abn.pmd Rev. 07/2010

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