

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

D. 1507 14 Ph 12: 24

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF TOAHO

The assumed business name which the under	signed use(s) in the transaction of
business is:	-
Quality au Contho	7/5
 The true name(s) and <u>business</u> address(es) of business under the assumed business name: 	
Name	Complete Address
Tice M GALBARD 1	1545/ Rain boul dR
	Vanga Icl. 83687
3. The general type of business transacted under Retail Trade	
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing☐ Finance, Insurance, and Real Estate	Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson
	Basement West
Tice GABBARO.	PO Box 83720 Boise ID 83720-0080
16451 Kaysad dk. Nampa 20. 83667	208 334-2301
5. Name and address for this acknowledgment	Phone number (optional):
COPy is (if other than # 4 above).	461-8476
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE IDAHO SECRETARY OF
Capacity/Title: CESNIEC -	E CK: CASH CT: 158010 BH: 668616 1 0 20.00 = 20.00 ASSUM NAME # 2

(see instruction # 8 on back of form)