Capacity/Title:\_

(see instruction #8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

09 MAR 13 AM 8: 14

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NOTE: See instructions on reverse before fling. FFE SECRETARY OF STATE 1. The assumed business name which the undersigned use(s) in the GansaOfolDAriO business is: Greene Leadershi 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name Nancy J. Greene 540 Belle Street, P.O. Box 33 Peck: Idaho 83545-0033 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Services - Training Agriculture Submit Certificate of Assumed Business Manufacturing Mining . Name and \$25.00 fee to: Finance, Insurance, and Real Estate Secretary of State 4. The name and address to which future 700 West Jefferson correspondence should be addressed: Basement West PO Box 83720 Greene Leadership Boise ID 83720-0080 208 334-2301 83545-0033 Phone number (optional): 5. Name and address for this acknowledgment CODY IS (if other than # 4 above): 208-486-6482 Secretary of State use only Signature: Printed Name: