

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.

submits for filling a certificate of Assumed B	lusiness Name
Please type or print legibly.	SEP 17 AM 9: 03
NOTE: See instructions on reverse befo	
	ATE OF IDAHO
The assumed business name which the unc	dersigned use(s) in the transaction of
business is:	
L Might Lang	And Company
	ay company
The true name(s) and business address(es) business under the assumed business nam	of the entity or individual(s) doing
Name ,	Complete Address
Lane Gochnour	_ '
The state of the s	A
	Malta ID 83342
3. The general type of business transacted und	der the assumed business name is:
Retail Trade X Transportation	and Public Utilities
Wholesale Trade Construction	
Services X Agriculture	
	Submit Certificate of
	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
	Basement West
Lane Gochnour	PO Box 83720
2023 E 3600 S	Boise ID 83720-0080
Malta ID 83342	208 334-2301
5. Name and address for this acknowledgmen	t Phone number (optional):
copy is (if other than # 4 above);	208 844 5510
	208 824 5518
	Secretary of State use only
	,
	N 1965
Signature Jochnous	33 333
Printed Name: Lane Gochyour	IDAHO SECRETARY OF STATE State
Capacity/Title: Owner	CK: 376 CT: 158010 BH: 782105 1 9 25.00 = 25.00 ASSUM NAME # 2

(see instruction # 8 on back of form)

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