

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. 2014 DEC -5 PM 3: 50

Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the undersig	ned use(s) in the transaction of
business is:	
ARCAYENA Tax & Accounting	
2. The true name(s) and business address(es) of th	e entity or individual(s) doing
business under the assumed business name:	
<u>Name</u>	Complete Address
Noel A. Arcayena 2770	E. Franklin Rd, Meridian ID, 83642
	an annumed hunings name is:
. The general type of business transacted under the	
Retail Trade Transportation and I	Public Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	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:	450 North 4th Street
Noel Arcayena	PO Box 83720
1917 W. Glade Creek St.	Boise ID 83720-0080 208 334-2301
Meridian, ID 83646	200 004-2001
5. Name and address for this acknowledgment	
COPY is (if other than # 4 above).	
	Secretary of State use only
nature:	
	IDAHO SECRETARY OF STATE
ited Name: Noel A. Arcayena	12/05/2014 05:00 CK:1042 CT:303840 BH:14519
pacity/Title: Owner	16 25.00 = 25.00 ASSUM NAME
nature:	
nted Name:	
pacity/Title:	DIOC 341
abn.pnd Rev. 07/2010	D175346