| CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name: TIDAHO AND STATE | |
|--|--|
| | |
| FOX BEAN COMPANY | |
| The true name(s) and business address business under the assumed business n | iame is/are. |
| <u>Name</u> | Complete Address |
| KELLY J. FOX | 320 2nd AVE. North Twin Falls, Idaho 83301 |
| 3. The general type of business transacted (mark only those that apply) Retail Trade Manufacture Agriculture Services Construction The name and address to which future correspondence should be addressed: | uring |
| 320 2nd Ave. North Twin Falls, Idaho 83301 | Submit Certificate of Assumed Business Name and \$20.00 fee to: |
| 5. Name and address for this acknowledge copy is (if other than # 4 above): | Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| 103 MALLS (2. E. P.O. BOX 17.05 TWIN FALLS (2. 83301 | Secretary of State use only IDAHO SECRETARY OF STATE 02/03/1998 09:00 CK: 945145 CT: 2947 BH: 78658 |
| Signature: | 1 @ 20.00 = 20.00 ASSUM NAME |
| Printed Name: KELLY J. FOX | - D11725 |
| Capacity: OWNER (see instruction # 8 on back of form) | — [§ |