

## 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.

11 JAN 31 AM 9:21

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

SECREMRY OF STATE STATE OF IDAHO

	STATE OF IDAHO
1. The assumed business name which the undersig business is:	ned use(s) in the transaction of
APPRAISAL S	DUTCE
The true name(s) and <u>business</u> address(es) of the business under the assumed business name:	e entity or individual(s) doing
<u>Name</u>	Complete Address
JAMES A. WORKMAN APPRAISALS INC. (C/22/22)	JOAHD FALLS, ID 83404
3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction	
Services	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  GREEN WORKMAN	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
3120 WASTERN AVE.	208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
ignature:	
rinted Name: GREGIRY J WIRKMAN apacity/Title: FRESIDENT/OWNER	
ignature:	IDAHO SECRETARY OF STATE 01/31/2011 05:00
rinted Name: Capacity/Title:	CK: 4957 CT: 91702 BH: 125776 1 0 25.00 = 25.00 ASSUM HAME

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