

Printed Name:

Capacity/Title: OWNCR

(see instruction # 8 on back of form)

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.

Please type or print legibly.

NOTE: See instructions on reverse before filing.



The assumed business name which the undersign business is:	gned use(s) in the transaction of
Richard Waggones Dry	W/AII
The true name(s) and business address(es) of the	he entity or individual(s) doing
business under the assumed business name:	Commission Addition
Name	Complete Address
RICHARD WASSONERS CO	138 N Chastere
	14hol, LD 83801
The general type of business transacted under the	he assumed business name is:
Retail Trade Transportation and	Public Utilities
☐ Retail Trade ☐ Transportation and ☐ Wholesale Trade ☒ Construction	rubiic Oulides
Services Agriculture	
☐ Manufacturing ☐ Mining	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
Kielwid Waggoner	PO Box 83720 Boise ID 83720-0080
26438 N Chastone	208 334-2301
14thol LD 8380/	
. Name and address for this acknowledgment	Phone number (optional):
COPY IS (if other than # 4 above).	509-679-2919
SAMC	
	Secretary of State use only
School & III	
ature: Mary The Wayner &	

IDAHO SECRETARY OF STATE

10/04/2005 05:00

CK: 1877 CT: 158810 BH: 914992
1 @ 25.00 = 25.00 ASSUM NAME # 2

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