



# CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.  
Filing fee: \$25.00.

**FILED EFFECTIVE**

2015 DEC -7 AM 9:38

SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

HANCOCK INSURANCE AGENCY

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

MARK HANCOCK                      46 NO 2ND EAST REXBURG, ID 83440

(Name)    (Address)

(Name)    (Address)

(Name)    (Address)

(Name)    (Address)

3. The general type of business transacted under the assumed business name is:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Retail Trade    | <input type="checkbox"/> Construction  | <input type="checkbox"/> Transportation and Public Utilities            |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Mining   |
| <input type="checkbox"/> Services        | <input type="checkbox"/> Manufacturing | <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

MARK HANCOCK

(Name)

46 NO 2ND EAST

(Address)

REXBURG                      ID                      83440

(City)    (State)                      (Zipcode)

5. Name and address for this acknowledgment copy is (if other than # 4):

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: MARK HANCOCK

Signature: X *Mark Hancock*

Printed Name: MARK HANCOCK

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

**12/07/2015 05:00**

CK:431 CT:196301 BH:1503161  
1@ 25.00 = 25.00 ASSUM NAME #3

*D183075*