## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFECTIVE

	submits for filing a certificate of Assumed Business Name.	
	Please type or print legibly. NOTE: See instructions on reverse before	SECRETARY OF STATE STATE OF IDAHO filling.
1. The	e assumed business name which the unde siness is:	rsigned use(s) in the transaction of
	Southwestern Su	ppy
2. The	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:	
	Name	Complete Address
L	isa R. Lyle	156 OASIS Rd. Caldwell
		ED. 83607
3. The	e general type of business transacted unde	r the assumed business name is:
X _	Retail Trade Transportation ar Wholesale Trade Construction	nd Public Utilities
L	Services Agriculture	Submit Certificate of
	Manufacturing  Mining	Assumed Business
لـــا	Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The	name and address to which future	Secretary of State
	respondence should be addressed:	700 West Jefferson
1	isc. Luie	Basement West
	75 215 - 0	PO Box 83720 Boise ID 83720-0080
2	SE CADIS Rd	208 334-2301
CC	119mell (11) 8360x	
5. Na	me and address for this acknowledgment	Phone number (optional):
cok	Dy is (if other than # 4 above):	208-571-1054
		QC0-57-105
<del></del>		Secretary of State use only
_	10	
mature:_		8
	(piprisiure required)	<b>50</b>

Sig Printed Name: \_\_\_\_\_ Capacity/Title: Own ex (see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE
01/30/2007 05:00
CK: 1839885 CT: 172099 BH: 1829743
1 8 25.80 = 25.80 ASSUM NAME 1 2

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