

Signature:____

Printed Name:

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME ASSUMED

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.

Dan Cole

Owner

(see instruction #8 on back of form)

Diverse Systems	
The true name(s) and business address(e business under the assumed business na Name Dan Cole	
☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: Dan Cole 1050 East 9th South	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Mtn. Home, Idaho 83647-3509 i. Name and address for this acknowledgm copy is (# other than #4 above):	ent Phone number (optional): 208-587-9835

IDAHO SECRETARY OF STATE 12/19/2002 05:08 CK: 384859 CT: 24876 BH: 652329 2 20.00 = 20.00 ASSUM MARE 1 2

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